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## Form 990

## **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

Department of the Treasury

2009

Inter	nal Rever	nue Service	L_	- i ne organiz	ation may have to us	se a copy of the	nis return to s	atisty state repor	ting require	ements	Open	i to rubiic irisp	ection
	For the	e 2009 calen	dar year,	or tax year be	eginning 7/0	01	, 20	09, and endi	ng 6,	/30	,	2010	
В	Check if	applicable	D(	C						D Emple	yer identif	ication Number	
	Add	ress change	Please use IRS label	veterans	of Foreig	yn Wars				86-	-00768	386	
	Nan	ne change	or print or type		homas Rd.					<b>E</b> Telep	hone numbe	er	
	Initi	al return	See specific	Scottsda	le, AZ 852	251				480	0-941-	·5258	
	Terr	mination	Instruc- tions										
	$\vdash$	ended return								G Gross	receipts \$	305,	189
	$\vdash$	dication pending	F Name a	and address of prin	ncinal officer				H(a) is the	s a group reti			X No
		meation perioning		As C Abov	•				1	ill affiliates in		Yes	No
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<u>, , , , , , , , , , , , , , , , , , , </u>					₩. F	7		•		p exemption		1673	
K		of organization	Corpora	ation Trust	X Association	Other ►		L Year of Forma	tion 193	3   M	State of leg	gal domicile AZ	
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<u>₹</u>	6 7				e if necessary)						6		0
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E E	bN	Net unrelated	business	s taxable inco	me from Form 9	90 T, line	34				7 b		0.
						,				Prior Yea	_	Current Yea	
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<b>#</b>				iue (Part VIII,								300,	<del>500.</del>
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₹å			•		), lines 5, 6d, 8d		and 11e)			10,	-		201.
SCANNED Revenue D					11 (must equal			. line 12)		330,	513.	305,	189.
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Expenses				•		•		26 602	-				
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	l .		•		), lines 11a-11d		RFCF	IVED		173,		205,	
	1				ust equal Part I)	1 1	(A), Ime-25	)		315,		342,	
	19 F	Revenue less	expense	s Subtract lin	ne 18 from line 1	2 4	114811 - 15	63 0010	81	14,	953.	-37,	<u>536.</u>
Net Assets or Fund Balances						山山	MOA S	3 SAIA	Ø Beg	inning of	Year	End of Yea	ır
900	20 T	Total assets (	(Part X, III	ne 16)		HI]_	an angara mengenyakan	مالاستان ما المناز ما الما	141	1,345,	901.	1,318,0	040.
, A B	21 7	Fotal liabilitie	s (Part X	, line 26)		-	nche	N. UT		50,	000.	50,	000.
žį	22 N	Net assets or	fund bala	ances Subtra	ct line 21 from I	ine 20	1.011.	1		1,295,	901.	1,268,0	040.
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					ve examined this retu	irn including a	accompanying	schedules and sta	tements an	d to the best	of my know	uladoe and ballef it	
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Sig	ın	<b>▶</b>	<	-1 -	~				1	11-18	-10	)	
He	re	Signature	of officer			_		31		Date			
		► Leona	ard Ku	czynski		6	voet	ASTOP	Corr	Maste	229		
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_								Date	1.	Check if	Prei	parer's identifying nu	umber
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Pro		Preparer s signature	Ear	l E Glenr	n, EA			11-18-1	o	employed •	• X	10002000	
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On	ly	employed) address and	► <u>684</u>		nas Rd.						86-077		
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					arer shown abov					<del></del>		X Yes	No
RΔ	A For F	Privacy Act a	and Paner	work Reduct	on Act Notice	see the se	narate incti	ructions		TEEADIL	12/20/0	9 Form 990	(2000)

Form <b>990</b> (	(2009) Veterans of Foreign Wars	86-00	7688	6		Page 2
Part III	Statement of Program Service Accomplishments					
1 Briefl	fly describe the organization's mission					
Pro	ovides Arizona state wide assistance to Veterans of Fore	eign_Wars				
2 Did th	the organization undertake any significant program services during the year which were no	ot listed on the prior				
Form	n 990 or 990-EZ?			Yes	X	No
	es,' describe these new services on Schedule O				_	
	the organization cease conducting, or make significant changes in how it conducts, any pr	ogram services?		Yes	X	No
	es ' describe these changes on Schedule O					
and 5	cribe the exempt purpose achievements for each of the organization's three largest progra 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of enses, and revenue, if any, for each program service reported	m services by expens grants and allocation	ses Sec is to oth	tion 5 ers, t	01(c) he tot	(3) al
<b>4a</b> (Code	de (Expenses \$ 254,727. including grants of \$ 87.	998 ) (Payarus	<u> </u>	3.0	n 9:	88.)
	ovides Arizona state wide counseling, assistance to veter					
	dical care, provides burial squad assistance for veterans		7117	<u> </u>	7 7 37	<b>-</b>
liied	arcar care, provides burrar squad assistance for vecerans	5 _11eeus				
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	is now never for the distriction of the second of the seco					
<b>4b</b> (Code	de i (Expenses \$ including grants of \$	) (Revenue	\$			)
					- <del>-</del> -	
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4c (Code	de (Expenses \$ including grants of \$	) (Revenue	\$			)
·						
		<del> </del>				
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4d Othe	er program services (Describe in Schedule O)					
	penses \$ including grants of \$ ) (F	Revenue \$			)	
	al program service expenses ► 254,727.					

			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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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 VII, VIII, IX or X as applicable	17	Х	
•	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			
12	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
	AWas 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			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X
t	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		Х
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		_X
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		X
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	
19	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>

Form 990 (2009) Veterans of Foreign Wars

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	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
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
	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?	24b		
	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		
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
	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		Х
	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 current or former officer director, trustee, or key employee? If 'Yes,' complete Schedule L Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		_ X
	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  Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
	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		Х
	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, line 1	34		Х
	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
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes' complete Schedule R, Part V. line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule $R$ , Part $VI$	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38		X

BAA

Form 990 (2009)

Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 0 1 a Information Returns Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W 3, Transmittal of Wage and Tax Statements, filed for the 0 calendar year ending with or within the year covered by this return 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 Χ 3 a this return 3 b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 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 Χ **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? Х 5 a Χ 5 b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 50 Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? 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 Χ provided to the payor? 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ Form 82827 7 c 7dd If 'Yes' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal Χ 7 e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 Χ g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9 a a Did the organization make any taxable distributions under section 4966? b Did the organization make any distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 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

Form 990 (2009)

12 a

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?

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

11 b

12b

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.	Governin	ig Boc	iy an	<u>a ivia</u>	nage	emer	<u>nt </u>														
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		number of v	•					•	•							1 a			- 6			
ı	<b>b</b> Enter the	number of v	voting n	nembe	rs that	t are	ındep	ende	ent							1 b						
2		officer, directo irector, truste					yee h	nave a	a fan	mily re	elatio	onship	or a b	usines	s relat	tions	hip with	n any oth	ner	2		X_
3	Did the o	rganization d	delegate or truste	e contr	ol ove key e	er mai	nagen yees t	ment to a r	dutie mana	es cu	stom	narily p compa	erform	ed by	or und	der th	ne direc	t superv	rision	3		Х
4	Did the o	rganization n	make ar	ny sign	nficant	t char	nges t	to its	s orga	anıza	tiona	al docu	ments	•					Γ	4		X
	since the	prior Form 9	990 was	filed?	,				_										Γ			
5	Did the o	rganization b	oecome	aware	durin	ng the	e year	of a	mat	terial	diver	rsion o	of the o	rganiza	ation's	ass	ets?			5		Χ
6	Does the	organization	n have r	nembe	ers or	stock	holde	ers?						•						6		X
7	a Does the	organization a body?	n have r	nembe	ers, sto	ockho	olders,	, or c	other	r pers	ons '	who m	nay ele	ct one	or mo	re m	ember	s of the		7 a		Х
ļ	•	decisions of t	the gov	erning	body	subje	ect to	apprı	roval	by m	emb	ers, st	lockhol	ders, o	r othe	er pe	rsons?		Ī	7 b		X
8	Did the o	rganization c	contemp	orane	ously	docui	ment	the n	meet	tings t	held	or writ	tten ac	tions u	nderta	ken	during	the year	by			
,		rning body?																	1	8a		Χ
	,	nmittee with	authorit	ty to a	ct on l	hahal	lf of th	ho aa	overn	nına h	odu2	,							}	8b		$\frac{X}{X}$
	Is there a	any officer, di	irector o	or trus	tee. or	r kev	emple	lovee	e liste	ed in f	Part	VII. S	ection i	A, who	cann	ot be	reach	ed at the		80		Λ
	organiza	lion's mailing	addres	s? <i>If</i> '	'Yes,' μ	provid	de the	e nan	mes a	and a	addre	sses i	n Sche	dule O						9		X
Sec	ction B.	Policies	(This	s Sec	tion E	B red	ques	its ir	nfori	mati	ion a	about	t polic	ies n	ot red	quire	ed by	the Int	ernal			
₹ev	enue Code	)																				
																			_		Yes	No
10	a Does the	organization	have l	ocal ch	napters	s, bra	anches	s, or	affılı	liates?	7									10 a		_ X
1	<b>b</b> If 'Yes ' o and bran	loes the orga ches to ensu	anizatioi ire their	n have opera	writte	en po are co	ilicies onsist	and tent v	proc with	edure those	es go e of th	overnir he org	ng the a anizati	activitie on?	es of s	such	chapte	rs, affilia	ites.	10Ь		
11	Has the	organization į	provide	d a co	py of t	this F	orm 9	990 ta	o all	mem	bers	of its	govern	ning bo	dy bei	fore	filing th	e form?	L	11		Χ
11,	<b>A</b> Describe	ın Schedule	O the p	roces	s, if ar	ny, us	sed by	y the	orga	anızat	tion t	to revi	ew this	Form	990	Se	e Sci	nedule	∍ O [			
12	a Does the	organization	n have a	writte	n con	flict c	of inte	erest	polic	cy? If	'No,	go to	line 1.	3					L	12 a		Χ
1	<b>b</b> Are office to conflic	ers, directors its?	or trus	tees, a	and ke	ey em	ıploye	es re	equire	ed to	disc	lose a	nnually	ıntere	sts th	at co	uld giv	e rise		12b		
(		organization O how this		rly and	d cons	sistent	tly mo	onitor	r and	d enfo	orce (	compli	iance w	vith the	polic	y? If	'Yes.'	describe	ın	12c		
13	Does the	organization	n have a	writte	en whi	stlebl	lower	polic	cy?											13		X
14	Does the	organization	n have a	writte	en doc	umer	nt rete	entior	n and	d des	truct	ion po	licy?							14		X
15	Did the p	ocess for de	etermini v data.	ng cor	npens ontem	sation	of the	ie foll	lowir stant	ng per tiation	rsons	s inclu	ide a re	eview a	nd ap	prov	al by ir	ndepende	ent			
	•	nization's CE	•											J GG	000.0					15 a	İ	Χ
	-	icers of key e					•		- g			-								15 b		X
		line 15a or							dule	O (S	See ir	nstruct	lions )							.55		
16	a Did the o	rganization ii	nvest in		•					•			•	or sim	ılar aı	rang	ement	with a ta	exable	16 a		Х
ı	<b>b</b> If 'Yes,' ł in joint vi	nas the organenture arrang th respect to	nization gements	s unde	r appli	licable														16b		
Sec		Disclosu		range	ments	o ·											•			100	[	
		tates with wh		ony of	this F	orm	990 16	s ran	urec	d to b	e file	od ► 1	None									
	Section 6	5104 requires n Indicate hi website	s an org	anızatı make	ion to	make avail	e its F lable	orms	is 102	23 (or	r 102 app	– 4 if ap	plicabl	<b>–</b> – – e), 990	 ), and	990-	T (501	 (c)(3)s o	nly) av	– – – aılabl	e for p	 oublic
19	Describe	ın Schedule	O whet	her (a				e org	L janız	<u> </u>	•	•		nng do	cume	nts, d	conflict	of intere	est polic	y, ar	nd fina	ncıal
	statemer	its available l name, physi	to the p	ublic			-	_					•	•		•			•	•		
		E_Thomas																	·		. – – -	

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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. 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 employees, and former such persons

X Check this box if the organization did no (A)	(B)		,	((			, 3	(D)	(E)	(F)		
Name and Title		Posi	tion (			hat appl	y)					
ivaine and Title	Average hours per week	Individual trustee or director	Institutional trustee	_	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		
V. Joe Reagan												
State Commander	0							0.	0.	0		
Dennis Dole												
State Cmdr 2010	0							0.	0.	0.		
Leonard Kuczynski												
Corp. Master	0							0.	0.	0.		
Ray Thomas	_											
State Adjunct	0							0.	0	0		
Tim Bolland												
St. e Advocat.	0							0.	0.	0.		
Mike Ferguson								0	0	0		
Jr Vice Cmdr	0						_	0.	0.	0.		
			<u> </u>									
	<u> </u>											
		1										
	-	<u> </u>	<u> </u>		<u> </u>		-					
	-											

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, (A)	(B)			(6	:)			(D)	(E)		(F)	
Name and Title	Average hours per week			Officer	Кеу е	Highest compensated employee	_	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amo con f orc ar	stimated unt of of opensation from the ganization of relate anization	ther ion on ed
											_	
		ļ 										
1 b Total  2 Total number of individuals (including but not limite	d to tho	se li	ste	d ab	ove)	) wh	o re	0. ceived more than	0. \$100,000 in report	able co	mpens	0 satio
from the organization   0											Yes	N
3 Did the organization list any former officer, director on line 1a? If 'Yes' complete Schedule J for such i	or trust ndividua	ee, al	key	emį	oloy	ee.	or h	ghest compensat	ed employee	3		Х
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater tradividual	portable han \$15	e cor 50,00	mpe 00?	nsa If 'Y	tion 'es'	and com	l oth <i>plet</i>	er compensation e Schedule J for :	from such	4		X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc	compens	satio	n fr	om i	any	นกาย	elate	ed organization fo	r services			X
Section B. Independent Contractors									,,		1	
Complete this table for your five highest compensation from the organization	ted inde	pen	den	t cor	ntra	ctors	s tha	it received more t	han \$100,000 of			
(A) Name and business addres	s							Description (	) of Services	Yes		on
								1	l l			

	<u> </u>		(4)	(B)	40)	(D)
	•		(A) Total revenue	Related or	(C) Unrelated	Revenue
		Ì		exempt	business	excluded from tax
		1		function revenue	revenue	under sections 512, 513, or 514
	1a Federated campaigns 1a 161,	163		10101100		312, 313, 01 314
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		724.				
S S	) · · · · · · · · · · · · · · · · · · ·					
S. A.		096.				
E S	d Related organizations 1d					
S E	e Government grants (contributions) 1e					
달음	f All other contributions, gifts, grants, and					
BE	similar amounts not included above 1f 9,	005.				
žõ	g Noncash contribns included in Ins 1a-1f \$					
	h Total. Add lines 1a-1f	-	300,988.			
- H	Business C	ode				
Ä	2a					
Ä	b					
Ğ.	c				·	
ER V						
S E						
RA RA	f All other program service revenue					
PROGRAM SERVICE REVENUE	-	•				-
	g Total. Add lines 2a-2f					
	3 Investment income (including dividends, interest are other similar amounts)	nd 📘	4 201	4 201		
	•		4,201.	4,201.	<del>-</del>	
	4 Income from investment of tax-exempt bond proce	}				
	5 Royalties	<b>&gt;</b>				
	(i) Real (ii) Persi	onal				
	6a Gross Rents					
	<b>b</b> Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	<u> </u>			77.11	
	7a Gross amount from sales of (i) Securities (ii) Oth	er				
	assets other than inventory					
	<b>b</b> Less cost or other basis					
	and sales expenses					
	c Gain oi (loss)					
	d Net gain or (loss)	<b></b>				
	8a Gross income from fundraising events				* /	
NUE	(not including \$	ĺ		*		
VEN.	of contributions reported on line 1c)			5		
RE	See Part IV, line 18	ł	,			
OTHER REVE	b Less direct expenses b					
0	c Net income or (loss) from fundraising events	▶				
				, to		
	9a Gross income from gaming activities See Part IV, line 19	ŀ		*		
	b Less direct expenses b					
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue Business C	ode	· · · · ·			
	11a b		<del></del>			
	d All other revenue		<del>-</del> .			
		▶				
	e Total. Add lines 11a-11d	<u> </u>	205 100	4 000		
	12 Total revenue. See instructions	•	305,189.	4,201.	0.	0.

Part IX | Statement of Functional Expenses

	Section 501(c)(3  All other organizations must comp		ations must complete a not required to comple		(D).
Do .	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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				•
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	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	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.	0.	0.	0.
7	Other salaries and wages	124,654.	90,997.	33,657.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	12,466.	8,228.	4,238.	
11	Fees for services (non-employees)				
	a Management				
ı	<b>L</b> egal				<del> </del>
	Accounting	1,500.	1,500.		
	d Lobbying		\$		
	Prof fundraising svcs See Part IV, In 17		* * * * * * * * * * * * * * * * * * * *		
1	Investment management fees	.,			
•	g Other				<del></del>
12	Advertising and promotion				
13	Office expenses	2,237.	2,237.		
14	Information technology				
15	Royalties	0.4.050	0.016	15.006	· · · · · · · · · · · · · · · · · · ·
16	Occupancy	24,252.	8,246.	16,006.	
17 18	Travel Payments of travel or entertainment	39,156.	39,156.		
	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	26,558.	26,558.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<del>_</del> <del>, </del>
23 24	Insurance 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)	40.055			
	Supplies	40,263.	6,166.	7,415.	26,682.
	All other Expenses	33,554.	33,554.		· · · · · · · · · · · · · · · · · · ·
	Postage/Printing	31,946.	31,946.		
	Awards	3,439.	3,439.		
	Telephone	2,700.	2,700.		
	All other expenses	242 725	054 707	61 216	26 600
	Total functional expenses Add lines 1 through 24f	342,725.	254,727.	61,316.	26,682.
26	Joint costs. Check here ►				
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Part X Balance Sheet

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(A) Beginning of year End of year 26,603 58,057. 1 Cash - non-interest-bearing 1.181.998 2 1.093.003. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 39,000. 7 7 Notes and loans receivable, net 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10 a 116,980. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 137,300 116,980. b Less accumulated depreciation 10 b 10 c 11 11 Investments - publicly-traded securities 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 11,000. 15 Other assets See Part IV, line 11 15 1,345,901 1,318,040. 16 Total assets Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 50,000. 19 50,000. 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 50,000 50,000. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 1,295,901 1,268,040. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 1,268,040. Total net assets or fund balances 1,295,901 33 1,345,901 1,318,040. Total liabilities and net assets/fund balances 34

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Part XI   Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b Were the organization's financial statements audited by an independent accountant?	2b		Х
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?	2с		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule $\mathsf O$			
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			ŀ
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?	3 a		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	lit 3b		

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