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Department of the Treasury Internal Revenue Service

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)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2010

Open to Public Inspection

<u>A</u>	For the	e 2010 cal	endar year,	or tax year beginning		, а	nd ending			_				
<u>B</u> _	Check if a	applicable	C Name of	organization						D	Emplo	yer iden	tification n	ıumber
	Address c	change		VETE:	RANS OF	FOREIGN	WARS POS	T #494		_				
$\overline{\Box}$	Name cha	2000	Doing Bus	siness As		-				1	41-	0763	665	
		•	Number a	and street (or P O box if n	nail is not de	livered to street	address)		Room/suite	E		one numi		
\sqcup	Initial retui	ım		56TH AVENUE			,			-	•		 -9914	L
	Terminate	ed		wn, state or country, and 2						十一	, , ,	<u> </u>		·
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H		1				IM 3342	9-2113		1	GG	ross rece	pts \$	4,036	, 691
Ш	Application	on pending		d address of principal offic					H(a) Is this a	group re	eturn for a	ffiliates?	Yes	X No
				AL EBERLING									Yes	☐ No
				BRENTWOOD	AVE		- 4		H(b) Are all					NO
_		1	CRYS		10	<u>MN 5</u>	5428		_	vo, at	acn a II	st (see in	structions)	
<u></u>	Tax-exe	empt status		01(c)(3) X 501(c) (nsert no)	4947(a)(1) or	527	1					
<u>J</u>	Websit	te: ▶ C		<u>lvfw494.org</u>					H(c) Group	exemp	tion nui	nber 🕨		
<u>K</u>	Form of o	organization	X Corpo	oration Trust As	ssociation	Other >		LY	ear of formation	<u> 195</u>	3	M State c	of legal domicil	e MN
F	Part I	Su	ımmary			_								
	1 E	Bnefly de	scribe the o	organization's mission	or most si	gnificant activi	ties:							
•		ENAB	LING TH	HE CARE OF TH	E VETE	RAN, HIS	WIDOW AND	ORPHANS	3.					
ğ						•		•	-					
r				•										
Activities & Governance	۱ , ر	Chack the	s hov	if the organization di	licooptinuo	tute energian	or disposed of a	mara than 25	0/ of the not as					
Ö				embers of the governir				nore than 25	% of its net as	sseis. I	_ 1	10		
, නේ									• •	ĺ	3	19		
ž į				lent voting members o							4	19		
₹ 5				viduals employed in ca	=	ar 2010 (Part V	/, line 2a)			-	5	54		
Ä	1			inteers (estimate if nei	• •	•				-	6		<u>-</u> .	
	7a ⊺	Total unre	elated busir	ness revenue from Pa	ırt VIII, colu	mn (C), line 12	2			l	7a			<u>, 562</u>
٤	1 d	Net unrel	ated busine	ess taxable income fro	m Form 99	0-T, line 34					7b		-30,	246
<u>.</u> ,	Ì								Prior Y			C	urrent Year	
Revenue			-	ants (Part VIII, line 1h				<u>L</u>			358		1,	<u>, 992</u>
, u	9 F	Program	service regu	enue (Part VIII, line 2g	g)			Ł	2	1,7	701		22,	, 863
2/1	10 1	Investme	nt income ((Part VIII column (A),	lines-3,-4,	and 7d)			•	(529			586
~	11 (Other rev	enue (Part	VIII, column (A) lines	5, 6d, 8c,	9c, 10c, and 1	1e)	Г	52	7,7	780		539	703
				lines 8 through 11 (mi		•		1		5,9				144
				mounts paid (Part IX)			(/ .//							
	14 E	Renefits r	naid to or fo	or members (Part IX, c	Columni(A)	line 4)	•	 						
	1 4- 6			pensation, employee b			(A) hood 5 10)		21	7,8	552		355	926
Expenses	46-5			sing fees (Part IX, colu			A), lines 5–10)			. / , (32		333,	, 320
ē	loar					-	•							
X	D			penses (Part IX, colum		-	•				-			
_	" `	-	,	rt IX, column (A), lines	-	•		-		0,2				,089
	1			l lines 13–17 (must eq	•		ine 25)	 -		8,0				015
_	19 F	Revenue	less expen	ses Subtract line 18 f	from line 12	2				2,1			<u>-92,</u>	<u>, 871</u>
Net Assets or	3	T-4. 1	_1_ /5	L . 40)				-	Beginning of Co				End of Year	
SSG	20 7		ets (Part X,	•				-		6,2				532
# # F	21 7		ilities (Part	•				-		1,7				, 909
			ts or fund b	alances Subtract line	21 from lin	e 20			66	4,4	194		<u>571,</u>	<u>, 623</u>
<u></u> F	Part II	<u>' Sig</u>	gnature E	<u>Block</u>									_	
U	Inder pen	naities of p	елигу, I decla	are that I have examined t	this return, in	cluding accompa	anying schedules ar	nd statements,	and to the best	of my k	nowled	ge and be	elief, it is	
tr	ue, corre	ect, and co	mplete Decla	aration of preparer (other	than officer)	is based on all in	nformation of which	preparer has a	ny knowledge					
				-					·					
Sig	gn	s	ignature of of	fficer	1/1	1	40			^	Date			
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_		Pont/Typ	e preparer's	name		Preparer's signal	ture		Date	T	Check	ıf P	PTIN	
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_				n with the preparer sho		•	ions)	<u></u>					Yes	No
For DA/	r Paper A	work Red	auction Ac	t Notice, see the sep	arate instr	uctions.							Form 99 () (2010)

	VETERANS OF FOREIG		1-0763665	Page 2
	atement of Program Service	e Accomplishments a response to any question in th	ic Part III	
Bnefly descnl	pe the organization's mission:			
NABLING	THE CARE OF THE	VETERAN, HIS WIDOW AN	ID ORPHANS.	
			•	
Did the organ	ization undertake any significant pro	gram services during the year which were	not listed on the	
prior Form 99				Yes X No
	nbe these new services on Schedule			
bid the organ	ization cease conducting, or make s	ignificant changes in how it conducts, any p	orogram	Yes X No
	ribe these changes on Schedule O			
	-	ach of the organization's three largest prog	ram services by expenses Section	
		4947(a)(1) trusts are required to report the	e amount of grants and allocations to	
others, the to	tal expenses, and revenue, if any, fo	r each program service reported		
(Code:) (Expenses \$	including grants of \$) (Revenue \$	
(0000.	/ (Expended 4	watering grante or \$, Kitoronico C	
	•			
(Code) (Expenses \$	including grants of \$) (Revenue \$	
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Other progra	m services (Describe in Schedule C			
(Expenses		ding grants of \$) (Revenue \$)
	ım service expenses 🕨			
4				Form 990 (2010

Part IV	Checklist	of Required Schedules
Palliv	CHECKIISE	or Reduired Schedules

			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			x
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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, or have a section 501(h)	-		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C.			
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	<u> </u>		
_	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		x
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	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	11b		X
C	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	11c		X
d	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	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		_ <u>X</u> _
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
I4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	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, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	-	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			•
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
• •	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 (see instructions)	4.		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	4.0		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		
. •	If "Yes," complete Schedule G, Part III	19	x	
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	LVa		
-	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ь		
	F		~~	

Page 4 **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 Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 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 23 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 X 24a 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 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 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 X 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 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 X 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M Х 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R. Part I X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 X X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Yes X No Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 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, X 37

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

Form 990 (2010)

DAA

Enter the number reported in Box 3 of Form 1086. Enter -0-if not applicable 1	Pa	art V Statements Regarding Other IRS Filings and Tax Compliance				
1s Enter the number reported in Box 3 of Form 1098. Enter -0- in fort applicable 1st Distribute for Internet of Forms W-25 included in line in Enter -0- if not applicable 2st Distribute for Enter -0- included in line in Enter -0- if not applicable 2st Distribute for Enter -0- included in line in Enter -0- if not applicable 2st Distribute for the calendar year anding with or within the year covered by this return 3st Enter the number of employees reported on Form W-3. Transmitted of Wage and Tax Statements, filled for the calendar year anding with or within the year covered by this return 3st Enternets, filled for the calendar year anding with or within the year covered by this return 3st Enternets, filled for the calendar year anding with or within the year covered by this return 3st Enternets, filled for the calendar year anding with or within the year covered by this return 3st Enternets, filled for the calendar year anding with or within the year covered by this return 3st Enternets, filled a form 90-T for the year if ThO; provide an explanation in Schedule O 3st Enternets, filled a form 90-T for the year if ThO; provide an explanation in Schedule O 3st Enternets and the state of the foreign country over, a financial account in a fill and year in the state of the foreign country over, a financial account in a fill and year in the state of the foreign country over, a financial account in a fill and year in the state of the foreign country over, a financial account in a party to a prohibet data sheller transaction? 4st Enternet in the state of the foreign country over, a financial accountry over the state over the		Check if Schedule O contains a response to any question in this Part V				حليلم
be Enter the number of Forms W-2G included in the 1s. Enter -0" in of applicable of Did the organization comply with backup withholding uples for reportable payments to vendors and reportable gaming (gambing) with backup withholding uples for reportable payments to vendors and reportable gaming (gambing) with backup withholding uples for reportable payments to vendors and reportable gaming (gambing) with backup with organization for all required derivate in programments are stated as a form of the calendar year endorg with or within the year covered by this return. Satements, Ried for the calendar year endorg with or within the year covered by this return. If we have no fines is a dark a greater than 250, you may be required to e-Rie, (see instructions). If all least one is reported on line 2a, do the organization file all required derivate applyonent tax returns? Note: If the sum of sines is a dark and the state of the foreign country (such as a bank account, or or a signature or other authorn) or a state of the foreign country (such as a bank account, or a signature or other authorn) or a signature or other authorn or a signature or other autho	_	E de Marco anto a contra Day Day Contra de Con	. 1 25		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) with more with the year of the time that the provided provided the provided provided the provided provided the provided provide	_	· •		-		
seporable gaming (gambing) winnings to prize winners? Statements, flied for the calendary year ending with or within the year covered by hits return Statements, flied for the calendary year ending with or within the year covered by hits return Nota: If the sum of fines to and 2s is greater than 250, you may be required to e-file. (see Instructions) If which is the sum of fines to and 2s is greater than 250, you may be required to e-file. (see Instructions) If which is the sum of fines to and 2s is greater than 250, you may be required to e-file. (see Instructions) If which is the sum of fines to and 2s is greater than 250, you may be required to e-file. (see Instructions) If which is the did of firm 896-7 for this year? If who, provide an explanation in Streedule 0 If which is the did of firm 896-7 for this year? If who, provide an explanation in Streedule 0 If which is the did of firm 896-7 for this year? If who, provide an explanation in Streedule 0 If which is the calendar year, did the organization file for as a bank account, securities account, or other financial account in Series of the organization file for the as a bank account, securities account, or other financial account in Series of the organization file for the series of the organization file for firm TD F 99-22.1, Report of Foreign Bank and Financial Accounts Was the disparational part by a prohibited tax shelter transaction at any time during the tax year? See the organization report and organization file for misses. If "Yes," end the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any conhibitions that were not tax deductible? The organization solicit any conhibition that were not tax deductible? The organization solicit any conhibition that were not tax deductible? The organization solicit any conhibition that twe and tax deductible? The organization shall many receive deductible contributions under section 170(c). The organization shall be accompaniated in the		· · · · · · · · · · · · · · · · · · ·	10	-		
2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, life of the catendary year ading with or within the year covered by this return 2	С				v	
Stements, filed for the catendary year ending with or within the year covered by this return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3	•		:: i	1C	_^_	
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note if the sum of lines 1 and 2a is greater than 250, you may be required to effice; (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 995-T for this year? If "No," provide an explanation in Schedule O 3d At any time during the calendary year, did the organization have an interest in, or a spatiative or other authority over, a financial account in a foreign country feuch as a bank account, securities account, or other financial accounts 4a X 4b X 4c If "Yes," effect the name of the foreign country feuch as a bank account, securities account, or other financial accounts 5a Was the organization a party to a prohibited tex sheller transaction at any time during the fax year? 5a Was the organization a party to a prohibited that was or is a party to a prohibited tex sheller transaction? 5b Did any taxabile party nority the organization file form 888-17? 5c Did see the organization of organization file form 888-17? 5c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization mounted with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization mounted with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization mounted with every solicitation and express statement that such contributions or guite the organization file and organization file an	2a	•	o E4	1		
Note. If the sum of lines 14 and 24 is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business greas incrince of \$1,000 or more dump the year? If Yes, 'has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O July 18 at Aury time duming the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts Swas the organization in a part to a prohibetic tax shelter transaction at any time duming the tax year? 5a				┧,, │	v	
3. Due the organization have unrelated business gross income of \$1,000 or more during the year? bif Yees, 'has it filed a Form 990-T for this year?' I 'No,' provide an explanation in Schedule O 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 in a foreign country (such as a bank account, securities account, or other financial account in a foreign country bif Yees, 'enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions of the foreign country See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for the value for the organization and the organization include with every solicitation an express statement that such contributions organizations that many receive deductible contribution and express statement that such contributions or gifts were not tax deductible? 1 If Yees, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles 1 If Yees, 'did the organization include the contribution and partly for goods and services provided to the payor? 1 If Yees, 'did the organization include the contributi	D			20		
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Intitation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand the organization is licensed to issue qualified to maintain by the states in which the organization is required to maintai	d	•		┥		
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Section A. Governing Body and Management

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.

Check if Schedule O contains a response to any question in this Part VI

X

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19	•			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct						
	supervision of officers, directors or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members						l
	of the governing body?				7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?				7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following					البيا	
а	The governing body?				8a	X	<u> </u>
ь	Each committee with authority to act on behalf of the governing body?				8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<u> </u>		9	<u></u>	<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Int	<u>ernaı</u>	Kev	enue (Jode.		
40-	Describe assessmention becomes because a second of the terms				40	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such				406		
44.	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?				10b		\vdash
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?				440		x
h	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				11a		
ь 12а	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give				124		-
b	rise to conflicts?				12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				120		\vdash
·	describe in Schedule O how this is done				12c		
13	Does the organization have a written whistleblower policy?				13		х
14	Does the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approval by						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						i
а	The organization's CEO, Executive Director, or top management official				15a		X
b	Other officers or key employees of the organization				15b		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
-	with a taxable entity during the year?				16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			•			
_	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the						
	organization's exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						—
17	List the states with which a copy of this Form 990 is required to be filed ▶ MN					-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s on	lv) ava	ılable				

for public inspection. Indicate how you make these available. Check all that apply.

Own website	Another's website	X	Upon reques
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- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARLAND RONNING 5222 56TH AVE N

MN 55429-2713 763-537-9914

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Page 7

Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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 organization's tax year.
- 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, if any See instructions for definition of "key employee"
- 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

K Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (B) (C) (D) (F) (E) Name and Title Average Position (check all that apply) Reportable Reportable Estimated hours per compensation compensation from amount of Officer Highest compensated employee Individual trustee Institutional week from related other (describe the organizations compensation employee hours for organization (W-2/1099-MISC) from the related (WE2/1099-MISC) organization trustee organizations and related in Schedule organizations 0) (1) RANDAL EBERLING 8.00 X 0 CEO 0 (2) CURTIS SKOOG X 0 0 SR VICE COMM 2.00 (3) GEORGE KAISER X 0 0 24.00 JR VICE COMM (4) MARLAND RONNING 44.00 X 0 0 FINAN OFFICR 0 (5) MARLAND RONNING X 10.00 0 0 0 **QTR MASTER** (6) HARLAND ANDERSON X 8.00 0 ADJUTANT (7) JAMES HAWK 10.00 X 0 0 SERVICE OFFICER (9) (10)(11)(12)(13)(14)(15)(16)

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
•	(A) Name and Title	(B) Average hours per	Pos	rtion (hat a		(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other other compensation from the organization and related organizations
(17)						 					
(18)											
(19)											
(20)											
(21))										
(22)	22)										
(23)											
(24)											
(25)											
(26)											
(27)											
(28)											_
1b c	Sub-total Total from continuation shee	ets to Part VII, Se	ectio	n A				> >			
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>			
2	Total number of individuals (increportable compensation from				ose	liste	d abo	ove)	who received more than \$1	00,000 in	
3	Did the organization list any fo								ee, or highest compensated		Yes No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ individual	1a, is the sum o	f rep	ortab	ole co	ompe	ensat	lion		m the	3 X 4 X
5	Did any person listed on line 1a for services rendered to the org									dividual	5 X
	tion B. Independent Contracte			_						A100 000 4	
<u>1</u>	Complete this table for your fiv compensation from the organize	zation	nsate	ed inc		naer	nt co	ntrad		<u> </u>	(C)
	Name and	(A) I business address	_			-			Descrip	(B) ton of services	(C) Compensation
								\vdash			
				•				┪	· · · · · · · · · · · · · · · · · · ·		
										.	
2	Total number of independent of								listed above) who		the control
DAA	received more than \$100,000 i	in compensation t	UIN	ure (ıgar	ıızat	10/1			0	Form 990 (2010)

Part 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		
মম	1a	Federated campaigns	1a								
E		Membership dues	1b								
B.E.		Fundraising events	1c	•							
풀빏		Related organizations	1d	_				,			
S, E	9	Government grants (contributions)	1e	-	1,992						
ls is		All other contributions, gifts, grants,									
智	•	and similar amounts not included above	1f								
들	g	Noncash contributions included in lines 1a-1		\$							
ပ္ပန	_	Total. Add lines 1a-1f		•	▶ [1,992					
Program Service Revenue Contributions, gifts, grants					Busn. Code				-		
le l	2a	Program Service Reve	nue			18,965	18,965				
æ	b	MEMBER DUES				3,898	3,898				
. <u>e</u>	С						-				
اچ	d										
Ĕ	0										
g	f	All other program service reven	ue								
ڇ	g	Total. Add lines 2a-2f			•	22,863					
	3	Investment income (including d	ividend	ls, interest	t,						
		and other similar amounts)			▶	586			586		
	4	Income from investment of tax-	exemp	t bond pro	ceeds 🕨						
	5	Royalties			•						
		(ı) Real		(II) P	ersonal						
	6a	Gross Rents									
	b	Less rental exps									
	C	Rental inc or (loss)									
	d 7a	Net rental income or (loss) Gross amount from (1) Securities		1	•						
		sales of assets (i) Securities (ii) C			Other						
		other than inventory									
	b	Less cost or other									
	_	basis & sales exps		 							
	C	Gain or (loss)		1							
	u ea	Net gain or (loss) Gross income from fundraising ever	sto								
9	8a	(not including \$	ii.								
Other Revenu		of contributions reported on line 1c)							Į		
æ		See Part IV, line 18	а		6,640						
된	b	Less direct expenses	b		3,499						
ŏ	c	Net income or (loss) from fundr		events	▶	3,141			3,141		
		Gross income from garning activities			,	-,			,		
		See Part IV, line 19	a	3 <i>.</i>	207,000	Į					
	b	Less: direct expenses	b		258,301						
		Net income or (loss) from gami	ng acti		•	-51,301	-29,254	-22,047			
		Gross sales of inventory, less									
		returns and allowances	а		797,610						
	b	Less cost of goods sold	b		209,747						
	С	Net income or (loss) from sales	of inv	entory	•	587,863	470,290	117,573			
		Miscellaneous Revenue)		Busn. Code						
	11a										
	b				\vdash						
	C				<u> </u>						
	d	All other revenue			Ц						
	θ	Total. Add lines 11a-11d				P. 2. 2. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.	4.00				
	12	Total revenue. See instruction	s		•	565,144	463,899	95,526	3,727		

Form 990 (2010)
Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational		not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
organizations in the U.S. See Part IV, line 22 Grants and other assistance to undividuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 Benefits paid for or for members Compensation of current officers, directors, trustees, and two or for members Compensation of current officers, directors, trustees, and two years pressors (as direct under section 4586(C)(X)(B) Other salessane and wages Person plan contributions (rotules section 4016) and section 4010 and section				expenses	general expenses	expenses
2 Grants and other assistance to individuals in the U.S. See Part IV, line 2 Z. 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 e. 4 Benefits paid to or for members 5 c. 5 Compensation of current officiers, directors, trustees, and key employees 6 desired under section 4958(II(1)) and persons described in section 4958(II(1)) and section 493(II) and section 493(III) and section 493(IIII) and	1	-				
the U.S. See Part IV, line 22 Grafts and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 Benefits paid for or for members Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of middle above, to dequalified persons (see different under section 4858(c)(5)(8) 7 Other sales and wages 8 Person plan contributions (include section 40 (k) and section 40 (k) employee contributions) 9 Other employee benefits 1 Payroll taxes 1 Payroll taxes 3 A (4 2 0	2	-				
3 Grants and other assistance to governments, organizations, and indevduals outset 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 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Compensation of current officers, directors, trustees, and key employees 9 Compensation of current officers, directors, trustees, and key employees 9 Compensation of current officers and section 43560(11) and persons described in section 43560(1	_	· ·				
organizations, and individuals outsade 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 6 Compensation not included above, to disqualified pensors (see Identical deverse and 4586(ff)(1) and persons described an section 4958(g(3)(8)) 7 Other salters and wages 8 Penson plan contributions (include section 401(s) and section 4001(s) penjoyer contributions) 9 Other employee benefits 1750 10 Payroll taxes 11 Fees for services (non-employees) 12 Management 13 Legal 14 Legal 15 Legal 16 Lobbying 17 Professional fundrasing services See Part IV, line 17 17 Investment management fees 18 Other 19 Advertising and promotion 10 Office expenses 10 Office expenses 11 Information technology 15 Royaltiss 16 Occupancy 17 Tirvel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Payments to fitratel or entertainment expenses for any federal, state, or local public officials 10 Conference, conventions, and meetings 10 Interest 11 Payments to affistates 12 Depreciation, depletion, and amortization 13 Insurance 14 Adversaria to affistates 15 Depreciation, depletion, and amortization 15 Insurance 16 Adversaria time 24 registers on Schoolas O, and Aminitarian Carlos and any Carlos and Adversaria	3	,				, , , , , ,
U.S. See Part IV, lines 15 and 16 8enefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Compensation of included socion 4958(f)(1) and persons described in action 4958(f)(1) and persons described in action 4958(f)(1) and persons described in action 495(f) and section 4958(f)(1) and section 4958(f)(1		-				
4. Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 6. Compensation not included above, to disqualified persons (as defined under section 4958(t)(1)) and persons described in section 4958(t)(1)) and persons described in section 4958(t)(3)(8) 7. Other salers and wages 8. Person pian contributions (include section 401(t)) and section 401(t) and section 401						
trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(cf)(f)) and persons described in section 4958(cf)(f)) and persons described in section 4958(cf)(f)) and persons described in section 4958(cf)(f)) and section 4958(cf)(f) and section 4958(cf) and section 4958(4	· ·				
6 Compensation not included above, to disqualified persons (as defined under section 4558(0)(1)) and persons described in section 4558(0)(1) and persons described in section 4558(0)(1) and persons described in section 4558(0)(1) and section 40(1)(1) and section	5	Compensation of current officers, directors,				
6 Compensation not included above, to disqualified persons (as defined under section 4558(0)(1)) and persons described in section 4558(0)(1) and persons described in section 4558(0)(1) and persons described in section 4558(0)(1) and section 40(1)(1) and section		· ·				
persons (as defined under section 4958(c)(3)(8) 7 Other salances and wages 8 Person plan contributions (include section 401(k) and section 403(k) employer contributions) 9 Other employee benefits 750 10 Payroll taxes 34,420 11 Pees for services (non-employees) a Management b Legal c Accounting d Lobbying Professional fundrasing services See Part IV, line 17 I Investment management fees Other 20 Other 13 Office expenses 14 Information technology 15 Royalites 16 Occupancy 17 Travel 17 Payroll states 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 1 Interest 1 Interest 1 Payments of affiliates 2 Depreciation, depletion, and amortization above (List miscellaneous expenses in line 241 if line 241 amount exceeds 10% of line 25, column (A) amount, list line 241 expenses or Schodule O.) a MAINTENNANCE & REPAIR b ANN DIABR PROMOTIONS c DEPRECIATION 2 4, 14.3 3 Conferences, Condentions 4 Good Barroll Conditional expenses, Add lines 1 litrough 241 for line 25 (complete this line only if the organization reported in column (B) joint costs form a combined column (B) joint costs form a column cell column (B) joint costs form a columned columned in the column (B) joint costs form a columned	6	•			_	
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and section 403(b) employer contributions) 9	7		320,756			
9 Other employee benefits 750 34,420 750	8	Pension plan contributions (include section 401(k)				
10		and section 403(b) employer contributions)				
11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying Professional fundrasing services See Part IV, line 17 f Investment management fees g Other Advertising and promotion 13 Office expenses Information technology Royalties Cocupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Lober expenses in line 24 if line 24 amount exceeds 10% of line 25, column (A) amount, list line 24 expenses on schedule O. MAINTENIANCE & REPATR B BAND/BAR RROMOTIONS c DEPRECIATION Supplies 20, 466 All other expenses 21, Intoward 22, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	9	Other employee benefits	750			
a Management b Legal c Accounting d Lobbying e Professional fundrasing services See Part IV, line 17 Investment management fees g Other 2 Advertising and promotion 3 Office expenses 1 Information technology 8 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Interest 12 Payments to affiliates 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Other expenses. Itemize expenses in line 24f if line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) a MAINTENANCE & REPAIR b BAND/BAR PROMOTIONS 10 DEPRECIATION 14 OSUPALIS SCOURM 15 OSUPALIS SCOURM 16 OSUPALIS SCOURM 16 OSUPALIS SCOURM 17 OSUPALIS SCOURM 18 OSUPALIS SCOURM 19 OSUPALIS SCOURM 19 OSUPALIS SCOURM 19 OSUPALIS SCOURM 10 OSUPALIS SCOURM 10 OSUPALIS SCOURM 10 OSUPALIS SCOURM 10 OSUPALIS SCOURM 11 OSUPALIS SCOURM 11 OSUPALIS SCOURM 12 OSUPALIS SCOURM 15 OSUPALIS SCOURM 16 OSUPALIS SCOURM 16 OSUPALIS SCOURM 17 OSUPALIS SCOURM 18 OSUPALIS SCOURM 18 OSUPALIS SCOURM 19	10	Payroll taxes	34,420			
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26 Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational	25	-		0	0	0
SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational			227,220	<u>.</u>		
(B) joint costs from a combined educational		SOP 98-2 (ASC 958-720) Complete this line				
Compagn and randrasing Scientific		campaign and fundraising solicitation .				

Form 990 (2010)

Balance Sheet Part X (A) (B) Beginning of year End of year 126,393 147,419 1 Cash-non-interest bearing 64,718 114,308 Savings and temporary cash investments 2 2 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 40,124 33,679 7 Notes and loans receivable, net 20,685 20,063 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 1,349,909 other basis Complete Part VI of Schedule D 003,230 363,736 346,679 10b 10c **b** Less accumulated depreciation 11 11 Investments—publicly traded secunties Investments—other securities See Part IV, line 11 12 12 13 Investments-program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 686,272 591,532 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 21,778 19,909 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities Complete Part X of Schedule D 19,909 21,778 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here and complete Balances lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporanly restricted net assets Net Assets or Fund Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ |X| and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 664,494 571,623 32 32 Retained earnings, endowment, accumulated income, or other funds 664,494 571,623 33 Total net assets or fund balances 33 686,272 591,532 Total liabilities and net assets/fund balances

Form 990 (2010)

-om	n 990 (2010) VETERANS OF FOREIGN WARS POST #494 41-0763665			_Pag	ge 12				
Pa	art XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI				\prod				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			144				
2	Total expenses (must equal Part IX, column (A), line 25)	2			015 871				
3	Revenue less expenses Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5	Other changes in net assets or fund balances (explain in Schedule O)	5							
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,								
	column (B))	6	<u> </u>	71,	<u>623</u>				
Pa	art XII Financial Statements and Reporting				_				
	Check if Schedule O contains a response to any question in this Part XII								
				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		<u> </u>				
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1 1						
	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 separate basis, consolidated basis, or both			•4	,				
	Separate basis Consolidated basis Both consolidated and separate basis			1	Septe				
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		X				
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	<u></u>	3b						
_			Form	990	(2010)				

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, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2010 Open to Public

Inspection

Name of the organization

Employer identification number

Part II				,	
Part II Organization Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate contributions to (during year) 5 Did the organization of the Bental of the organization or	V	ETERANS OF FOREIGN WARS POST #494		41-0	763665
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor severed funds (b) Funds and other accounts (b) Funds and other accounts Aggregate contributions to (during year) Aggregate variabution to (during year) Aggregate grants from (during year) Aggregate variabution and of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Post Did the organization inform all office stands and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferning membrable pravate benefit? Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Proservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified histone structure Preservation of open space Complete lines 2 a through 2d if the organization held a qualified conservation on internation of conservation easements The internation of the structure is a conservation easements Total number of conservation easements on a certified histone structure moduled in (a) Number of conservation easements on a certified histone structure moduled in (a) Number of conservation easements in confield, transferred, released, exhiquished, or terminated by the organization during the tax year Number of conservation have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements from the conservation easements unique the preservation of a seament in the conservation easement is modified, transferred, released, exhiquished, or terminated by the organization during the year No standard provides the conservation easements in modified, transfe					
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Part III	6	Did the organization inform all grantees, donors, and donor advisors in wr	iting that grant funds can be used		
Part II		only for chantable purposes and not for the benefit of the donor or donor a	advisor, or for any other purpose		
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of open space Preservation of open space Preservation of open space Preservation of open space Preservation of points and space Preservation of points and space Preservation of points and space Preservation of points are space Preservation of points and space Preservation of points are space Preservation of points and space Preservation of points are space Preservation Preservation of points are space Preservation of points are space Preservation of points are space Preservation of points					
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Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's inancial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS	a		, and not on a		
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2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the					Ф
•	2	• •	has similar assets for financial care, seemed	the ·	·
removing amounts required to be reported under SEAS 110 (ASC 350) relating to these fights	2	-	•	u ie	
a Revenues included in Form 990, Part VIII, line 1 ▶ \$	2	, , ,	amy to these items		¢
b Assets included in Form 990, Part X		•	••		\$

Part VI Land, Buildings, and Equ	uipment. See Form 990,	Part X, line 10.		
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		15,000	278 1 322	15,000
b Buildings		756,687	444,322	312,365
c Leasehold improvements				
d Equipment		578,222	558,908	19,314
e Other .				
Total. Add lines 1a through 1e (Column (d) must	equal Form 990, Part X, column	n (B), line 10(c).)	•	346,679

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010

Part VII	Investments—Other Securities. See Form 99	00, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	ar market value
1) Financial d	erivatives			
2) Closely-hel	d equity interests			<u>-</u>
3) Other				·
(A)				
(B)	•			
(C)				
(D)		-		
(E)		• • • • • • • • • • • • • • • • • • • •		
(F)			-	
(G)	•			
(H)	•			
(1)				
	(b) must equal Form 990, Part X, col (B) line 12)	-		
Part VIII	Investments—Program Related. See Form 9		<u>.</u>	
T are viii,	(a) Description of investment type	(b) Book value	(c) Method o	f valuation
	(-)	(0) 200 1200	Cost or end-of-ye	
(1)				
(1)				
(2)		- 		·
(3)				
(4)				
(5)		<u></u>	 	
(6)				
(7)				
(8)				
(9)				
(10)				
	(2) mast equal (e.m. eee, (a.t.), ee. (a) mie (e)	<u> </u>		
Part IX	Other Assets. See Form 990, Part X, line 15.			(h) B
	(a) Description			(b) Book value
(1)		·		
(2)				
(3)				
(4)		·		
(5)				
(6)		.		
(7)				
(8)				
(9)		.		·
(10)				
	(b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, line		1	· <u>-</u> ,
1	(a) Description of liability	(b) Amount	_	
	ncome taxes		1	
(2)			<u> </u>	
(3)	·			
(4)			_	
(5)			1	
(6)			1	
(7)			1	
(8)]	
(9)			_	
(10)				
(11)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 25)	>		
- FILL 40 44 0	2 7 4 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			

Sche	dule D (Form 990) 2010 VETERANS OF FOREIGN WARS POST	#494	41-0763665	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to A	Audited Fi	nancial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		_1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	-
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		_5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	ts With R	evenue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
0	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1	, ,	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			İ
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		_
С	Add lines 4a and 4b		4c	
_ 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	nts With E	Expenses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Pnor year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV)	2d		_
е	Add lines 2a through 2d		29	
3	Subtract line 2e from line 1) (3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		-
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_	<u> </u>
Pa	rt XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 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 part to provide any additional information

Schedule D (Form 990) 2010 VETERANS OF FOREIGN WARS POST #494

Pank XIV Supplemental Information (continued) 41-0763665

Page 5

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding
Fundraising or Gaming Activities
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 Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Employer Identification number

	VETERANS OF FOREI	GN WARS PO)ST	#49	14	<u>41-07636</u>	65
Pe	Fundraising Activities. Complete Form 990-EZ filers are not require				red "Yes" to Forn	n 990, Part IV, line	17.
1	Indicate whether the organization raised funds through				eck all that apply		
а	Mail solicitations	e Solicitation	n of noi	n-gove	ernment grants		
b	Internet and email solicitations	f Solicitation		-	-		
С	Phone solicitations	g Special fu	_		_		
đ	In-person solicitations			•			
2 a	Did the organization have a written or oral agreement w	uth any individual (ir	ockidine	office	are directore truetees		
	or key employees listed in Form 990, Part VII) or entity If "Yes," list the ten highest paid individuals or entities (formpensated at least \$5,000 by the organization	in connection with p	rofessi	onal fi	undraising services?		Yes No
	(i) Name and address of individual	(II) Activity		d fund- have	(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
	or entity (fundraiser)		custo	ody or rol of	from activity	(or retained by) fundraiser listed in	(or retained by) organization
			contrib	utions?		col (i)	
			Yes	No			
1							
			 				
2							
3							
3							
							· <u></u>
4							
			+				
5							
_							
6							
7							
			+	-			-
8							
_							
9							
							
10							
Tota	·	<u></u>			<u> </u>		
3	List all states in which the organization is registered or registration or licensing.	licensed to solicit co	ntributi	ons or	r has been notified it is	exempt from	
		•					

		e G (Form 990 or 990-EZ) 2		FOREIGN WARS POST		763665 Page 2
P	îng			nization answered "Yes" to F		
				ontributions and gross incom	ne on Form 990-EZ,	lines 1 and 6b. List
	Γ	events with gre	oss receipts greater than \$5		(a) Other averte	<u> </u>
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
						(add col (a) through
			(event type)	(event type)	(total number)	col (c))
ne						
Revenue	1	Gross receipts				
œ	2	Less Chantable			-	
		contributions				
	3	Gross income (line 1 minus		:		
		line 2)				
	4	Cash prizes				
	•	Cuon pineco				
	5	Noncash prizes				
ses	6	Rent/facility costs				
Direct Expenses	_					
ΜŽ	7	Food and beverages				
ချ	۵	Entertainment				
	ľ	Littertailinent			· .	
	9	Other direct expenses				
		•	Add lines 4 through 9 in column (d)			` ()
	11 ant		mbine line 3, column (d), and line 10	wered "Yes" to Form 990, P	P	·
_م	anu		on Form 990-EZ, line 6a.	wered tes to Form 990, F	artiv, line 19, or rep	ported more
	l	11011 \$ 10,000		(b) Pull tabs/instant	·-	(d) Total gaming (add
ž			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
Revenue						
	1	Gross revenue	115,981	3,091,019		3,207,000
	,	Cash prizes	81,829	2,561,946		2,643,775
ses		Cash phizes	02/025	2,302,310		2,043,773
Direct Expen	3	Noncash prizes				
ш х		·				
ĕ	4	Rent/facility costs				
_	_		17 142	507 202		614 506
_	5	Other direct expenses	17,143	597,383		614,526
	6	Volunteer labor	Yes %	Yes %	Yes %	0
	•	Tolumoon labor		<u> </u>	110	
	7	Direct expense summary	Add lines 2 through 5 in column (d)		•	3,258,301
	8	Net gaming income summ	pary Combine line 1, column d, and l	line 7		-51,301
٥	E-4	or the etato(e) intick it -	organization energics ====== x -4*	ties MN		
			organization operates gaming activition operate gaming activities in each of	•	•	9a 🗶 Yes 🗌 No
		No," explain	Special gamming delivation in cacif of			30 <u></u> 165 NO
_		•				
				· · · · · · · · · · · · · · · · · · ·		
0a	We	re any of the organization's	gaming licenses revoked, suspende	ed or terminated during the tax year?	•	10a Yes X No

b If "Yes," explain.

Sche	dule G (Form	990 or 990-EZ)	2010 VE	TERANS	OF	FOREIGN	WARS	POST	#494	41-07	63665	Page 3
11 `	Does the org	janization opera	te gamıng activit	ies with nonm	ember	rs?		_				Yes X No
12	_		, beneficiary or tr				artnership	or other en	tity			
		lmınister chantal					-				П	Yes X No
13			aming activity op	erated in:					•			_
a	The organiza										13a 10	0.00%
			•							• •	13b	%
b	An outside fa	•		 				l avanta ba	اسم میام		[130]	
14		me and address	s of the person w	no prepares u	ne orga	anization's gam	iing/specia	i events boo	oks and			
	records:											
	Name 🕨	KATHY GE	TTY									
		5222 56T	H AVENUE									
	Address ►	CRYSTAL								MON 554	129	
					•							
15a	Does the ord	anization have	a contract with a	third party fro	m who	om the organiza	ation receiv	es gaming				
	revenue?	,				g		J- J				Yes X N
_		or the amount of	coming coverus	rossived by	ho oro	anization N	œ			nd the	<u></u>	103 [55]
O			gaming revenue		_	jai iiZauUII 🚩	Ψ		al	nd the		
	_	•	etained by the th		Φ	•						
С	if "Yes," ente	er name and add	dress of the third	party								
	Name 🕨											
	Address ▶		•									
16	Gaming mar	nager informatio	n.									
		ū										
	Name ▶ J	OHN HAWK										
	Trainio F			•								
	Gaming mar	nager compensa	ation > \$	23,	300							
	Canning man	lager compense	adon P W	,								
	December	of services provi	ided NOVE	RSEE E	MPT.	OYEES, C	משמשו	CIIPPI.	TES			
	Description	or services provi				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		D 0 1 1 1.				
	Director	r/officer	X Employee	. Γ		ependent contr	actor					
		70111001	E-1 Employee	, <u> </u>		ependent conti	actor					
47	Mandatonid	liotabilitiono										
17	Mandatory d				abla d		- 46		_ 4_			
а	_	-	under state law t	o make chant	able d	istributions from	n the gamir	ng proceeds	s to			Yes X No
		ate gaming licen									LJ	Yes A Ne
Ь			tions required un				her exempt	t organization	ons or			
			wn exempt activ									
Par			Information.									
			nd (v), and Pa					, and 17b	o, as app	licable. Al	so complete	e this
	pa	rt to provide	any addition	al informat	ion (s	see instructi	ons).					
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										Schedule G /	Form 990 or 9	90-F7\ 201(
									•	, ciioauit G		JUPLE JEU IV

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2010
Open to Public Inspection

OMB No 1545-0047

Attach to Form 990 or 990-EZ.

VETERANS OF FOREIGN WARS POST #494

Employer identification number 41-0763665

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

A MEMBER IN GOOD STANDING IS ALLOWED TO ATTEND MEETINGS AND VOTE ON THE

DECISIONS MADE BY THE GOVERNING BODY.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 ALL RECORDS ARE AVAILABLE UPON REQUEST.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation ALL RECORDS ARE AVAILABLE UPON REQUEST.

Form 990, Part IX, Line 24f - Other Expenses

Description		Amount
PROFESSIONAL FEES	\$	19,970
Repairs/Maintenance	\$	8,853
PLOWING	\$	8,405
QUARTERMASTER EXP	\$	6,500
DONATIONS	\$	5,337
RUBBISH HAULING	\$	4,384
LINEN & LAUNDRY	\$	4,136
MISC POST EXPENSES	\$	4,034
CABLE TV FEES	\$	3,987
Taxes/Licenses	\$	2,913
FLAGS PURCHASED	\$	2,782
GROUNDSKEEPING	\$.	2,655
BANK CHARGES	\$	2,631

Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization VETERANS OF FOREIGN	WARS POST	#494	Employer identification number 41-0763665
SECURITY	\$	2,199	
VFW MDSE	\$	2,070	
OFFICE EXPENSE	\$	1,877	
Telephone	\$	1,809	
CASUAL LABOR	\$	1,650	
DINNERS & MEETINGS	\$	1,589	
NEWSLETTER EXPENSE	\$	1,380	
DUES PAID	\$	1,243	
OFFICE EXPENSE	\$	1,196	
PEST CONTROL	\$	1,137	
PENALTIES	\$	1,050	
Advertising	\$	913	
DEPREC-POST EQUIPMENT	\$	844	
POPPIES	\$	843	
Charitable Contributions	\$	150	
MISCELLANEOUS	\$	137	
BANK CHARGES	\$	137	
BAD DEBTS	\$	69	
CASH OVER	\$	-258	

Form 8868 (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

▶ |X|

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization **Employer identification number** print VETERANS OF FOREIGN WARS POST #494 41-0763665 File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions filing your 5222 56TH AVENUE NO return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions CRYSTAL MN 55429 01 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 4720 Form 990-EZ 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 MARLAND RONNING 5222 56TH AVE N The books are in the care of ▶ CRYSTAL MN 55429-2713 Telephone No ▶ 763-537-9914 FAX No. ▶ 763-537-2418 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box I. If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/11 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2010 tax year beginning , and ending If this tax year entered in line 1 is for less than 12 months, check reason. I Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

payment instructions.

990 / 990-PF			id Loans Receiva		2010
	or calendar year 2010, or	tax year beginning	9,;	and ending Empl	oyer Identification Numb
					oyer identification regime
VETERANS OF FORE	EIGN WARS POS	T #494		41-	-0763665
Form 990, Part 1	K, Line 7 - A	dditiona:	l Information		-
	e of borrower			Relationship to disqualified	d person
DUE FROM HOLD	ING CORPORATI	.ON		·····	·
4)					
5)					
				·	
8) 9)					
10)	<u> </u>				
				_	
Original amount borrowed	Date of loan	Maturity date	Rer	payment terms	Interest rate
1)			Nej	ay ment totillo	1416
2)					
3)					
1)	<u> </u>				
5)			- -		
5) 7)					_
7) 3)					
9)		-		· ·· · · · · · · · · · · · · · · · · ·	
10)					
					
	provided by borrower			Purpose of loan	·
1)					
2)					
3) 4)					
5)					
6)					
7)					
3)				<u> </u>	
9)					
10)					
Consideration fo	urnished by lender		Balance due at beginning of year	Balance due at end of year	Fair market value
i)	onog og lender		40,124	33,679	(990-PF only)
2)					<u> </u>
3)					
1)					
5)					
3)					·
7) 3)				<u></u>	
9)					
0)					
Totals			40,124	33,679	