See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

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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)

▶ 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

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 07-01 , 2010, and ending 06-30 , 20 11

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: American Legion Ernest Love Post 6
Doing Business As: Gene Smylie, Commander
Number and street (or P O box if mail is not delivered to street address): PO Box 1949
Room/suite:
City or town, state or country, and ZIP + 4: Prescott, AZ 86302-1949

D Employer identification no.: 86-0216512

E Telephone number: (928) 778-6628

G Gross receipts $: 155,593

F Name and address of principal officer: Gene Smylie
PO Box 1949, Prescott, AZ 86302

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (19) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶

L Year of formation: 1935

M State of legal domicile: AZ

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Post of honorably discharged U.S Armed Services Veterans

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	10
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	9
6	Total number of volunteers (estimate if necessary)	6	45
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	29,687	21,301
9	Program service revenue (Part VIII, line 2g)	122,638	132,838
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	639	74
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	945	1,380
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	153,909	155,593
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	46,130	43,292
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	115,628	104,328
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	161,758	147,620
19	Revenue less expenses Subtract line 18 from line 12	(7,849)	7,973

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	76,314	83,705
21	Total liabilities (Part X, line 26)	1,223	641
22	Net assets or fund balances Subtract line 21 from line 20	75,091	83,064

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Gene Smylie
Signature of officer
Date: 9/20/2011

Gene Smylie, Commander
Type or print name and title

COPY

Paid Preparer Use Only

Print/Type preparer's name: John R Stevens EA	Preparer's signature	Date: 09/19/2011	Check ☒ if self-employed	PTIN: P01233005
Firm's name ▶ Stevens Tax Services LLC			Firm's EIN ▶	
Firm's address ▶ PO Box 1913 Prescott AZ 86302			Phone no 928-443-0830	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

EEA

Form 990 (2010)

2-2 (pg. 2-12M) 7

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