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## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung banefit trust or private foundation)

OMB No. 1545-0047

2011

Open to Public inspection

	Depa	ertment of	the Treasury	, <b>1</b>	estant area or pro					വരു ശകരിക	
	Inten	nal Reven	ue Service		ay have to use a copy of this	s return to satisf	y state repo	rting requi	rements.	<u>)</u> Imspec	1100N
	A	For the	2011 cals	endar year, or tax year beg	inning	, 2011, a	nd ending			, 20	
	8	Check if	applicable:	C Name of organization VFW	Triangle Post 2799				D Employs	n noitsoilitnebi ve	umber
		Address	change	Doing Business As VFW T	riangle Post 2799					34-5511171	
	$\overline{}$	Name ch	· ·	<del></del>	ox if mail is not delivered to str	eet address)	Room/suite		E Telephoi	ne number	
		Initial reti	_	P.O. Box-266			}			330 542 9928	
				City or town, state or country	w and 7IP + 4	<del></del>	<u>L</u>		<del></del>	000 042 0020	<del></del>
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	꿈	Amende	}	New Springfield, Ohlo 444				r ———	<b>G</b> Gross re	<u>`</u>	48777.22
	ш	Applicati	on pending	1		_		L		tor affiliates? 🗹 Yes	
				L.,	la Rd. Poland, Chio 44514			4	li affiliates ır		s- 🔲 No-
(	<u> </u>	Tax-exer	npt status:		501(c) ( 19 ) < (insert no.) [	4947(a)(1) or	<b>□</b> 527	H "N	lo," attach a	list. (see instruction	ons)
(		Webske	· D WY	w.viwtrianglepost2799.org	j			H(c) Group	exemption	number ⊳	0256
	K	Form of c	organization;	✓ Corporation ☐ Trust ☐	Association ☐ Other ▷	LYea	r of formation	: 1933	⊠ State	of legal domicile:	ОН
	P	ent	Summ	iary							
		1	Briefly de	escribe the organization's	s mission or most signific	cant activities:	Patrictic	and Chari	table Acti	vities,	
			-	ship meetings and other so			*********				
	<u>ැප</u> ු -	1		ship meetings and other so			~~~~~~~~~~				
	連	l		And incoming the outer se		3 101 1110111111113		me nec ge			
SUVELOPE	Actions & Gevennance		Chook th	io boy N 🗆 if the execution	ation discontinued its au					:hh	
	్రక్ష	2		nis box ⊳ ☐ if the organiz			sposed of i	more mar		its net assets.	
	3	Į.		of voting members of the	• • • •	•			3		372
<u>w</u>	<b>₹</b>	I .		of independent voting me			•		4		219
	£5	5	Total nur	mber of individuals emplo	oyed in calendar year 20:	11 (Part V, line	2a)		5		8
	ទ្ធ	6	Total nur	mber of volunteers (estim	ate if necessary	icocnie	7		6		27
	4	7a	Total unr	related business revenue	from Part VIII, column (C	12 ne 72	- U.		7a	9	93240.42
		60	Net unrel	lated business taxable in	come from Form 990-T.	line 34	@    .		7%		29320.91
					to the		113	Prior Y		Current V	ear
( <u>~</u> )	_	- 8-	Contribut	tions and grants (Part VII	Il line 1h)	ARMA ES ES ES.	199	<del></del>	9300.00		8575.00
2012	2		D	and the management (Dark \/ III)	u i' 0-\				3350.00		0373.00
60	Revonue	10	Invoctore	ent income (Part VIII, colu	ma (A) times 2 4 and To	AGDEN.I	MJ. H	<del></del>	200 25		210 55
©	æ	44	OWNER	are income (Part VIII) and the Control	A) lines 5, 4, and A				209.35		210.55
		111		venue (Part VIII, column (	• • • • • • • • • • • • • • • • • • • •				15745.90	<del></del>	204889.66
		12		enue-add lines 8 through			1e 12)·	1	25254:25		213975.21
=		13		nd similar amounts paid (			· · [_			·	
$\mathcal{L}$		14		paid to or for members (I		•	· · <u>L</u>				
	SS	15	Salaries,	other compensation, empl	loyee benefits (Part IX, col	lumn (A), lines !	5–10)		59538.87		66758.08
BONNIEL	Expendes	168	<b>Professio</b>	onal fundraising fees (Par	t IX, column (A), line-110	e)					_
(Sign	8	Ь	Total fun	draising expenses (Part I	X, column (D), line 25) D	>				张 [ ]	
	ŵ	17	Other ex	penses (Part IX, column (	(A), lines 11a-11d, 11f-2	4e)			75896.67		95374.57
$\mathcal{O}\mathcal{I}$		18	-	penses. Add lines 13-17 (	· ·	•	<u>، ۱–</u>	1	35435.54		62130.63
		19	•	less expenses. Subtract		( 4, 2	" · ├─		10181.29)		51544.58
			110001100	ACCO EXPENSES. CODUTAGE	me to northine te :	<del></del>	Bar	O to estimie		End of Y	
	\$ 5	00	Total ass	and (Dark V. line 46)			1===	)35 CH (G) (G)			
	Het Assats or Fund Balances	20		sets (Part X, line 16)					35973.69	·	12518.27
	E SE	21		pilities (Part X, line 26) .			· ·				25000.00
		·		ts or fund balances. Sub	tract line 21 from line 20	<u> </u>	<u> </u>		35973.69		60973.69
		orî II	Signa	ture Block							
				ry, I declare that I have examine						ny knowledga an	d belief, it is
	tru	e, correct	, and comp	ete. Declaration of preparer (oth	ter than officer) is based on all i	nformation of whice	ch preparer ha	is any know	ledge.		
	)		IN	Column a. Ra	rd he				5-1	5-2012	
	Sig	<b>in</b>	Sign	nature of office	7			Da	ite		
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			Type	e or print name and title	Soft The -						
	_		Print/Tv	/pe preparer's name	Preparer's signature		Date		<u> </u>	PTIN	
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	_			s this return with the prep		e instructions)	<i></i>	· · · · ·	· · ·		s ∏ No
	For	Papero	ork Redu	ction Act Hotics, see the s	separate instructions.		Cat: No:	11282Y		Form	SSO (2011)

Part IV Checklist of Required 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	1		1
2-	Is the organization required to complete Schedule B; Schedule of Contributors (see instructions)?	2		1
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			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		✓
_	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		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable:			10°E
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	tta	13322	1'±0ii
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		✓.
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		1
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	110	_	1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		7
1	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.	111		<b>√</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b		12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		1
b		<del>                                     </del>	-	-
_	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
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, Parts II and IV.	15		1
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, Parts III and IV	16		1
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 (see instructions)	17		1
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			
19-	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII; line 9a?	18		✓.
20 -	If "Yes," complete Schedule G, Part III	19	1	ļ.,
		20a		1
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	l l

Form 99	00 (2011)		F	Page 4
Part	V Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
21	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		1
23	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		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	===		
	\$100,000 as of the last day of the year, 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 24b		<b>✓</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L., Part I	25a	-	1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			<u> </u>
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		,	
26	If "Yes," complete Schedule L, Part I	25b		1
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	-	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		977 George	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
D.	A-family-member of a current or former officer, director, trustee; or key-employee? If "Yes;" complete- Schedule L. Part IV	28b	ĺ	1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			<u> </u>
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29-	Did-the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		.↓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			t
	Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	20		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		-
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<del>                                     </del>	1
þ	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, Part V, line 2"	35b		4
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		<b> </b>	T
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		- 	,
38	Part VI	37	_	<b>√</b>
30	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		1
		•		

Part				
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   0	<u>.</u>	7° No.	- 55
b.	Enter the number of Forms-W-2G-included in line-1a. Enter-0-if-not applicable		를 사고 등 기록	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	¥ .	3
	Statements, filed-for the calendar-year-ending-with or within the year covered by this return.			<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	المستسنة	مغند
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	7.0	·	- Y
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	نسند
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	7	<del> </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	. 30	. •	<del> </del>
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ĺ
	account)?	4a		1
ь	If "Yes," enter the name of the foreign country: ▶	-ra	£. 4,5	- (-)
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Same of	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	-		├──
-	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	L Ga		-
-	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	7-13-	Fr. Fair	÷ 36
'а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7.		2.4
_	and services provided to the payor?	7a	الأدعائك	<b>1</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
C	Did the organization sell; exchange; or otherwise dispose of tangible personal property for which it was			ļ. —
•	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	X* 产量	914-15.	STATES .
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	المستسة	1
f.	Did-the organization, during-the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		$\overline{}$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	المناسبة المناسبة	المراجعة والمواجعة	230
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring.			
	organization, have excess business holdings at any time during the year?	8	أتنسنت	
9	Sponsoring organizations maintaining donor advised funds.	1,38	- 0. p	N 773
а	Did the organization make any taxable distributions under section 4966?	9a	先方題	5 Z 75
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	2 / Sag	2 4 4 4 5 2 3 3 7	, VI
a	Initiation fees and capital contributions included on Part VIII, line 12	2		12.5
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			100
11	Section 501(c)(12) organizations. Enter:	1	大學	
а	Gross income from members or shareholders		1.35	2 3
b	Gross income from other sources (Do not net amounts due or paid to other sources	أُمْرِينَ أَ	7.3	. J.
	against amounts due or received from them.)		Σ.,	5.5
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	تنشيهم	
p.	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   126		1,33	7 7 7
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	5	100	- 4
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.			25
b-	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans		7.74	- 2
C	Enter the amount of reserves on hand		, A.	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b-	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b beloweresponse to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule (	-			
	Check if Schedule O contains a response to any question in this Part VI				
Section	on A. Governing Body and Management				
			Yes	No-	
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	372	# A	Harry I	
	If there are material differences in voting rights among members of the governing body, or	5 77 50 G X 50	1.00000 1.5€1.		
	if the governing body delegated broad authority to an executive committee or similar		324	經過	
	committee, explain in Schedule O.		100 A	1000 M	
Þ					
2	any other officer, director, trustee, or key employee?				
3	Did the organization delegate control over management duties customarily performed by or under the directors of officers, directors, or trustees, or key employees to a management company or other person?	ect 3	-	1	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		<u> </u>	1	
6	Did the organization have members or stockholders?	6	<b>✓</b>	<u> </u>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoone or more members of the governing body?	int   7a	1		
b	Are any governance decisions of the organization reserved to (or subject to approval by) member	rs,	,		
	stockholders, or persons other than the governing body?	7b	<b>V</b>	<u> </u>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken duri	ng	200	20	
	the year by the following:				
а	The governing body?	8a	1		
þ	Each committee with authority to act on behalf of the governing body?	8b	1	<u> </u>	
9-	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	at	1		
Santi	on B. Policies (This Section B requests information about policies not required by the Internal Re	Maria C	odo	1	
3604	on b. Policies (This Section B requests information about policies not required by the internal ne	veriue C	Yes	No	
10a-	Did the organization have local chapters, branches, or affiliates?	10a	1	1	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapter		<del> </del>	+-	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			]	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form		1	1	
b₋	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			100 mg 1	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	23862	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict	s? <b>12b</b>			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes describe in Schedule O how this was done	s,"			
13	Did the organization have a written whistleblower policy?	13		1	
14	Did the organization have a written document retention and destruction policy?	,14		1	
15	Did the process for determining compensation of the following persons include a review and approval independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
_		27.44			
a b	The organization's CEO, Executive Director, or top management official	15a 15b	-	1	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	43.78As 3	<b>▼</b>   1857	
16a		mt 📑			
	with a taxable entity during the year?	16a	188 FT 252	1	
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		5		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard to organization's exempt status with respect to such arrangements?		533		
Secti	on C. Disclosure		ــــــــــــــــــــــــــــــــــــــ	ь	
17	List the states with which a copy of this Form 990 is required to be filed ▶ Ohio	<del></del>	<del></del> -		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sec available for public inspection. Indicate how you made these available. Check all that apply.	tion 501	(c)(3)s	only)	
	Own-website				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, confli	ct of inte	rest p	oolicy,	
	and financial statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books and reco organization: Robert A. Hughes Lake Milton, Ohio 330 654 4383	rds of the	8		

Page	7
raup	•

	•	·	
Ρ	art VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, a	ind
		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 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.

Check this box if neither the organization nor	any relate	d orga	aniz	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trust <del>ee</del> .
			(0	<b>)</b>						
(A)	(B)	(B) Position						(D)	(E)	(F)
Name and Title	Average	[ (do not check more than one ]						Réportable	Réportable	Estimated '
	hours per	officer and a director/trustee)						compensation	compensation from	amount of
	week (describe	8 2	3	0	×	욕포	7	from	related	other
	hours for	물물	뜵	Officer	ey e	콧물	Form	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	CE	. <del>d</del>	-	를	ye c	. <b>Ē</b>	(W-2/1099-MISC)	) <u>.</u>	organization
	organizations in Schedule	Individual trustee or director	nstitutional trustee		Key employee	] 🚆	}	j		and related organizations
	O)	👸	륦		0	25		ļ		organizations
	<b>,</b>		8			Highest compensated employee		į	ļ	
			-			].				_
(1) David A. Blakeman Commander	ł	l			l	1	1	1	1	
2710 E. Calla Rd. Poland, Ohio 44514	1 hour	L		✓	<u> </u>		<u> </u>	0	0	0
(2) David A. Olekshuk Senior Vice Commander		}			1			l		
10390 Carousel Woods Dr. New Middletown, Oh	1 hour		<u>L.</u> .	1				0	0	0
(3) Joseph Snyder Junior Vice Commander	]					1	Į	1		
11708 Springfield Rd., North Lima Ohio 44452	1 hour			✓	<u> </u>	<u> </u>		0	0	0
(4) Robert R. Crum Chaplain	]							Į.		
331 W. Salem St. Apt 115 Columbiana, Ohio 44408	1 hour	1	<u> </u>	<u> </u>			L	0	0	0
(5) William E. Agnew Judge Advocate	j	]		Ϊ,	,	)		]		
10330 Struthers Rd. New Middletown, Ohio 44442	1 hour	1						0	0	0
(6) Russell A. Tatum Adjutant										
3880 E. Calla Rd., Poland, Ohio 44514	1 hour	1					L	0	0	0
(7) Robert A. Hughes Quartermaster			-	-	-	-				. "
17776 Wallace Dr. Lake Milton, Ohio 44429	15 hours		L_	✓				\$6000.00	0	0
(8) James W. Heberling Cánteén Manager					1					
12265 Unity Rd. New Springfield, Ohio 44443	7 hour	1		<u> </u>	<u> </u>	<u> </u>	<u> </u>	\$5200.00	0	0
(9) Terri Szelazek Employee	j	1	l							-
9897 Youngstown-Poland Rd. New Middletown, O	30 hours	1						\$9339.31	0	0
(10) Robert W. Slifka Trustee										
P.O. Box 86 New Middletown, Ohio 44442	1 hour	<b>1</b>	<u> </u>	<u> </u>		1		0	0	0
(1-1) David-W. Coss Trustee				-		-			-	
148 Circleview Dr. New Middletown, Ohio 44442	1 hour	1	l			<u> </u>	<u> </u>	0	ď	0
(12) Ray Rice Trustee										
11247 Youngstown-Poland Rd. New Middletown,	1 hour	✓	1			}	<u> </u>	0	9	0
(13).	]		-			]-		-		-
	ļ			$ldsymbol{f eta}$	<u> </u>	<b> </b>	_	<u> </u>		
(14)	{		1							
	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>		l	<u> </u>	

Part	(A)  Name and title	(B)  Average hours per week (describe hours for related organizations in Schedule	(do not box, of lindividual or director	at ch	Posi eck s pe	tion more	s of the Highest compensated so of the employee	ne an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation of related organization (W-2/1099-Mills	(F) Estimated from amount of other is compensation
(15)							ă				
(16)					-			-			
(17)				Н							
(18)					-						
(19)				$\Box$						<del>,</del>	
(20)			·				-				
(21)					_						
(22)			-				-	-		-	•
(23)											
(24)			e.				-				-
(25)										-	
1b-	Sub-total					Ĺ.,			20539.31		
c d	Total from continuation sheets to Part	VII, Sectio	n A						20539.31		
2	Total number of individuals (including but reportable compensation from the organi							) W		ore than \$10	0,000 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete a For any individual listed on line 1a, is the organization and related organizations individual	ficer, direc Schedule J sum of re	for su portal	ich . ble (	<i>indi</i> com	vidu ipei	<i>ial</i> nsatio	n a	nd other comp	ensation fro	m the
5	Did any person listed on line 1a receive of for services rendered to the organization'									ation or indi	vidual 5
	n B. Independent Contractors										
1	Complete this table for your five highest of compensation from the organization. Repyear.										
	(A) <sup>-</sup> Name and business add	ress						-	(B) Description of s	ervices	(C) <sup>-</sup> Compensation
			-								
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abo	ove) who	

Call Company of the same		Statement of Hevenue	Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1a:	Federated campaigns 1a		_		
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b \$8575.00		s fra.		(E) & w & (E)
e E	C	Fundraising events 1c		-		- 19/
Gifts, Ilar Ar	đ	Related organizations 1d	1	S. 18 85		
S.E	е	Government grants (contributions) 1e	<b>1</b> .			,
P S	f	All other contributions, gifts, grants,	<b>1</b> . ,	Ţ.		
Contributions, and Other Sim		and similar amounts not included above 1f	F			
들의	g	Noncash contributions included in lines 1a-1f: \$	<b>1</b>		18 元 4	-A - 1 1
a C	h	Total. Add lines 1a-1f	\$8575.00			
		Business Code	بدريته بدر درأن		in a side of the same."	و كوفَيْ عَلَى اللَّهِ عَلَيْهِ مِنْ اللَّهِ عَلَيْهِ مِنْ اللَّهِ عِلْمُ فِي اللَّهِ عِلْمُ وَالْمَ
Program Service Revenue	2a					الشائد عششاء والمساد والمسائد
æ	ь		† · · · · · · · · · · · · · · · · · · ·			<del></del>
8	C					
Ş	d		<del> </del>	<u> </u>		<del></del>
E	е		f			
gra	f	All other program service revenue .			7.77	-
P 5	g	Total. Add lines 2a–2f	1			70 -13 PA-1
	3	Investment income (including dividends, interest,	<del> </del>	<u></u>	<u> </u>	<u> </u>
		and other similar amounts)	210.55	210.55		
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties	\$47637.22		\$47637.22	
		' (i) Real (ii) Personal	sa	E 54 - 17	~ 	The same that
	6a	Gross rents \$1672.60	1	المعاقبين والترابية المعاربين	Kromigi Talur yan	And the second
į	þ	Less: rental expenses				· 美国
	C	Rental income or (loss)		· = 51		18 18 48 3
	ď	Net rental income or (loss) ▶	\$1672.60	\$1187.55	\$485:05	
	7a	Gross amount from sales of (i) Securities (ii) Other	के ता है है		S 4. 3. 3	
		assets other than inventory		70 TO		
	b	Less: cost or other basis		· Artige Title	學 李溪	東北等東
		and sales expenses .			المحاجبة الرماعي	
1	С	Gain or (loss)		in the second se		
	d	Net gain or (loss)				
			· · · · · · · · · · · · · · · · · · ·			19 77 18 19 1
Ž	8a	Gross income from fundraising.				
<u> </u>		events (not including \$	# 4- 1 - 1	Same and		国家 李俊县
Other Reve		of contributions reported on line 1c).	42	\$ 1 \$ 1	\4\ \7 - <sub>4</sub> \	
ě		See Part IV, line 18 a		\$ 7% \sqrt{3}		
5	b	Less: direct expenses b				
	C	Net income or (loss) from fundraising events . ▶				
1	<b>9</b> a	Gross income from gaming activities.			J. 1	
		See Part IV, line 19 a \$191612.00		£ 1/1. 1€		
1	þ	Less: direct expenses b \$153783.00				200
	C	Net income or (loss) from gaming activities ▶	\$37829.00	\$26858.59	\$10970.41	
	10a	Gross sales of inventory, less	1		5 - \$1 210	
- 1		returns and allowances a \$199069.85				
1	b	Less: cost of goods sold b \$81319.01				to the first of
	С	Net income or (loss) from sales of inventory	\$117750.84	\$83603.10	\$34147.74	
- 1		Miscellaneous Revenue Business Code				
- {	11a		ļ			
- 1	ь					
	C		ļ			
}	d	All other revenue				
İ	e	Total. Add lines 11a-11d			,	i P i V
	12	Total revenue. See instructions ▶	\$213675.21	\$111859.79	\$932400.42	

## 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).

	Check if Schedule O contains a respon	se to any question	in this Part IX		<u></u> ∐
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C). Management and general expenses	(D). Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	\$20539.31	\$20539.31		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	\$30778.62	\$30778.62		
9 10 11	Other employee benefits	\$15438.13	\$15438.13		
a: b c	Management				
d e f	Lobbying				
g 12 13	Other	\$1719.02 \$3439.59			
14 15 16	Information technology				
17 18	Travel	\$56.00			
19 20 21	Conferences, conventions, and meetings	\$811.13			
22 23	Depreciation, depletion, and amortization . Insurance	\$5445.84		4 400	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b	Other Taxes  Membership, Postage & Subscriptions	\$11863.80 \$1687.66		2.55	A Same
c d e	Maintenance & Utilities Charity All other expenses Miscellaneous	\$46563.57 \$10461.35 \$13326.61	12490.64		
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	\$162130.63	\$88703.95		
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet					<del></del>		
	•				(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing			\$965.50	1	\$81643.29		
	2	Savings and temporary cash investments		\$13411.75	2	\$13667.91			
	3	Pledges and grants receivable, net			3				
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers,				The said the said			
	i	employees, and highest compensated employ Schedule L	Complete Part II of		5	لقسفسا			
	6	Receivables from other disqualified persons (a	as defi	ned under section	, , , , , , , , , , , , , , , , , , , ,	7,			
23	•	4958(f)(1)), persons described in section 4958(				-54			
		employers and sponsoring organizations of se			4				
		employees' beneficiary organizations (see instru	ctions)			6			
Assets	7	Notes and loans receivable, net				7			
\$	8	Inventories for sale or use			\$854.80	8	\$976.55		
	9	Prepaid expenses and deferred charges				9			
	10a	Land, buildings, and equipment: cost or	) )				- 42 - 12 mg (		
		other basis. Complete Part VI of Schedule D	10a	\$20741.64		36 C			
	b	Less: accumulated depreciation	10b	\$4511.12	\$20741.64	10c	\$16230.52		
	11	Investments—publicly traded securities			11				
	12	Investments-other securities. See Part IV, line			12				
	13	Investments-program-related. See Part IV, line		13					
	14	Intangible assets			14				
	15	Other assets. See Part IV, line 11				15			
	16	Total assets. Add lines 1 through 15 (must equa			\$35973.69		\$112518.27		
	17	Accounts payable and accrued expenses				17			
	18	Grants payable			18				
	19	Deferred revenue			19				
	20	Tax-exempt bond liabilities			20				
	21	• • •	crow or custodial account liability. Complete Part IV of Schedule D.						
jes	22		Payables to current and former officers, directors, trustees, key						
Ę		employees, highest compensated employees, Complete Part II of Schedule L	squaimed persons.		差				
Liabilities		•				22			
_	23	Secured mortgages and notes payable to unrela		•		23	*******		
	24	Unsecured notes and loans payable to unrelated		•		24	\$25000.00		
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines	s 17-2	4). Complete Part X					
		of Schedule D				25	<del> </del>		
	26	Total liabilities. Add lines 17 through 25				26	\$25000.00		
Ses		Organizations that follow SFAS 117, check h lines 27 through 29, and lines 33 and 34.	iere 🏲	and complete		(1) (1)			
au	27	Unrestricted net assets				27			
Ba	28	Temporarily restricted net assets				28			
<u> </u>	29	Permanently restricted net assets			29				
Ĕ		Organizations that do not follow SFAS 117, c	heck t	nere▶ 🔲 and			المحالية الم		
<u>6</u>		complete lines 30 through 34.	Carrier water and the contract of the contract	J					
ফ	30	Capital stock or trust principal, or current funds		30					
3S.	31	Paid-in or capital surplus, or land, building, or ea				31			
ξ	32	Retained earnings, endowment, accumulated in				32			
Net Assets or Fund Balances	33	Total net assets or fund balances			\$35973.69		\$87518.27		
	34	Total liabilities and net assets/fund balances .		<u></u>	\$35973.69	34	\$112518.27		

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were

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

Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 

issued on a separate basis, consolidated basis, or both:

☐ Separate basis

Form 990 (2011)

3a

3b