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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

OMB No 1545-0047

2011 Open to Public

,	denerit trust or private foundation)
Department of the Treasury	
ntemal Revenue Service	▶ The organization may have to use a copy of this return to satisfy state reporting requirement

Inspection For the 2011 calendar year, or tax year beginning 07-01, 2011, and ending 06-30, 20 12 Check if applicable C Name of organization VETERANS OF FOREIGN WARS-POST 392 D Employer identification no. Address change Doing Business As 54-1119242 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 2408 BOWLAND PARKWAY (757) 486-5875 Initial return Terminated City or town, state or country, and ZIP + 4 831,474 VIRGINIA BEACH, VA 23454-5207 Amended return G Gross receipts \$ Name and address of principal officer Application pending WILLIAM R SOWERS Is this a group return for affiliates? 2240 WILD OAKS CRESCENT, VA 23456 Yes X No Are all affiliates included? Tax-exempt status 501(c)(3) X 501(c) (1 9) ◀ (insert no) 4947(a)(1) or 527 If "No," attach a list (see Group exemption number Website ▶ N/A Form of organization X Corporation Trust [L Year of formation 1999 Association M State of legal domicite Partl Summary Briefly describe the organization's mission or most significant activities SEE STMT 2 ATTACHED G 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 12 11 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 12 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 34 0 Current Year Contributions and grants (Part VIII, line 1h) 27,825 20,040 Program service revenue (Part VIII has con EN.ED. ٥ Investment income (Part VIII, column A), lines 3, 4, and 70,0 2,742 242 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).

Total revenue - add lines 8 thtough 11(m) steeduar Part VIII grumn (A), line 12). 118,086 127,427 148,653 147,709 Grants and similar amounts part IX, column (A), times 1-3) 29,703 27,800 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) õ b Total fundraising expenses (Part IX, column (D), line 25) 124,567 97,566 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 154,270 125,366 Revenue less expenses Subtract line 18 from line 12...... (5,617 22,343 Beamning of Current Year Asset 20 620,258 Total assets (Part X, line 16) . . . 638,764 Total liabilities (Part X, line 26) . . . 22 Net assets or fund balances Subtract line 21 from line 20. 620,258 638,764 ances Signature Block Under penalties of penury, 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 10-30-2012 Sign onature of office DONALD E BROWN, QUARTERMASTER Here Type or print name and title Print/Type preparer's name Check f George M Thoma Jr CPA 10-24-2012 Paid self-employed P01006391 Preparer George M Thoma Jr CPA PC Firm's name Firm's EIN 3330 Pacific Avenue Ste 504 **Use Only** Firm's address Phone no Virginia Beach VA 23451 757-428-1787

X Yes

Pa			ent of Progra			plishments uestion in this Pa	urt III			-	
<u>-1</u>	Briefly de		organization's m		, to any q	2030011111111131		· • • • • • • •	· · · · · · · · · · · · · · · · · · ·	•••••	···· <u>·</u>
2						rices during the y				🗌 Yes	s ⊠ No
3			ese new service			changes in how r	t conducts	any program			
3	services'	?								🗌 Yes	X No
4			-		mplishmer	nts for each of its	three large	est program se	rvices, as measi	ured by	
						d section 4947(a renue, if any, for			-	int of	
	grants ar	iu allocatio	ms to others, the	total expense	s, and lev	reflue, il ally, for	each progr	am service rep	onea		
4a	(Code SEE ST	MT 2 AT		\$2	27,800	including grants	s of \$) (Revenue	\$)
				. – -					· •		
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			.							-	
										···· -	
4b	(Code) (Expenses	\$		including grants	of \$) (Revenue	\$)
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									· · · · · · · · · · · · · · · · · ·		
											
					_		<u>-</u>				
4c	(Code) (Expenses	\$		including grants	s of \$) (Revenue	\$)
						· -·				<u> </u>	
											
											
								-	-·	_	
					-						
4d	Other pro	ogram serv	rices (Describe i	n Schedule O)	·					· · · ·
	(Expense			including g)	(Revenue \$)	
4e	Total pro	ogram ser	vice expenses	<u> </u>	27,	800	-				000 (2014)

Form 990 (2011) VETERANS OF FOREIGN WARS-POST 392

54-1119242

Page 2

Partive 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,"			
2	complete Schedule A	1		<u>X</u>
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	ا ہ	}	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	1		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	1		
	"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 temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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
С	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 ⁹ If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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		X
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	-	Х
þ				
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outlisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	Х	<u> </u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach its audited financial statements to this return?	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		į	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		.	
	complete Schedule N, Part II	32		<u>X</u>
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	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	_		
0 -	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
20	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	_		
27	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,			
38	Part VI	37		<u>_X</u>
	402 Note: All Forms 000 files are required to complete Calculated	_	,	
	Note: All Form 990 filers are required to complete Schedule O	38	_X	

Statements Regarding Other IRS Filings and Tax Compliance

_	Check if Schedule O contains a response to any question in this Part V		• • •	Ц_
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
a_	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
∓ a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		v
b	If "Yes," enter the name of the foreign country	70		<u>X</u>
_	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		v
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
3a	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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
В	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
,	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
1	Section 501(c)(12) organizations. Enter	,		
' a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	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			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2011) VETERANS OF FOREIGN WARS-POST 392 Page 6 Part VI 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 Section A. Governing Body and Management Yes No If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 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? X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)

- available for public inspection. Indicate how you make these available. Check all that apply
 - Another's website
- X Upon request
- 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 during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► DONALD E BROWN (757) 486-5875

	(2011)	

VETERANS OF FOREIGN WARS-POST 392

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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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			((>)			(D)	(E)	(F)	
Name and Title	*		Reportable	Reportable	Estimated						
	hours per week	(do no	ot che	ck mo	ore th	an one		compensation from	compensation from related	amount of other	
	(describe	box, ı	ınless	pers	on is	both an		the	organizations	compensation	
	hours for	office	r and	a dire	ctor/t	rustee)		organization	(W-2/1099-MISC)	from the organization	
	related organizations in Schedule O)	I t d nrı dur ı sec ı et de o u r a o I f	ก r t s t t	f f c e	le	H - gherset	F o r m e r	(W-2/1099-MISC)		organization and related organizations	
(1) DAVID R GOLDSTEIN			Ė		 		-				
2 YR TRUSTEE		X						0	o	0	
(2) DOUGLAS R KELLER		1					\vdash				
2 YR COMMITTEE MBR		X		x				c	o	o	
(3) JONATHAN HARNDEN											
3 YR COMMITTEE MBR		X		İ				0	0	o	
(4) JOSEPH G BRADY											
1 YR TRUSTEE		X						0	0	0	
(5) PETER A GEBELEIN											
3 YR TRUSTEE		X						0	0	0	
(6) RALPH D STEPHENS											
4 YR COMMITTEE MBR		X						0	0	0	
(7) THERESA J DECHAMPLAIN											
5 YEAR HOUSE COMMITTE MEMBER		X						(0	0	
(8) DONALD E BROWN											
QUARTERMASTER	30.00			X	1			9,600	0	0	
(9) JOHN R BROOKS								, i			
JR V CDR	10.00	l		X				(0	0	
(10)MICHAEL E GAUGHAN											
SR V CDR	10.00	ļ		X	1			(0	0	
(11)MICHAEL T MARUSHIA SR											
ADJUTANT	2.00			X				(0	0	
(12)ROBERT G DUVALL											
CHAPLAIN				X			L				
(13)WILLIAM R SOWERS											
POST CDR	20.00			Х	_				0	0	
(14)											

(A)	(B)		<u> </u>		C)	<u> </u>	.pc.	(D)	(E)	(F)
Name and Title	Average hours per week	box,	unles	Pos eck m s pers	ition iore th son is	nan one both an		Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	office I t d In r I I s e V t c I e t d e o U c I a o I r	I t n r s u t s i t	O f f c	K	H c e I omp h p l e e o s n y t s e t e d	F o r m e r	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)			ľ						_	
(16)	<u> </u>									
(17)										
(18)										
(19)	1			-						
(20)	-	1								
(21)										
(22)	<u> </u>									
(23)	<u> </u>									
(24)										
(25)										
1b Sub-total	n A					• • •	> > >	9,600	0	0
Total number of individuals (including but not limited reportable compensation from the organization							nore		0	1
3 Did the organization list any former officer, director										Yes No
 employee on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the sum of reportant organization and related organizations greater than 	ortable comp \$150,000? If	ensatı "Yes,"	on a com	nd c	the e S	r comp chedul	ens e J 1	ation from the for such	• • • • • • •	3 X
 individual	mpensation	from a	ny u	nrel	ated	l orgar	ıızat	ion or individual	• • • • • • •	5 X
Section B. Independent Contractors	omplete con	oudio (, 101	540	pc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	· · · · · · · · · ·		, , , , , , , , , , , , , , , , , , ,
1 Complete this table for your five highest compensate compensation from the organization Report compeyear	· · · · · · · · · · · · · · · · · · ·									
(A) Name and business addres								(B) Description of si	ervices	(C) Compensation
			_					2334,000		3
Total number of independent contractors (including received more than \$100,000 of compensation from				iste	d ab	ove) w	/ho			

Part V	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
	1a	Federated campaigns 1	a				
	Ь		b 13,002	<u>-</u>			
Contn- butions,	c		c 7,038				
Gafts,	d		d				
Grants	_ 	_	e	-			
and Other	,	All other contributions, gifts, grants,	-	-			
Sımilar	'		f				
Amounts	_	Noncash contributions included in lines 1a-1					
	9			20.040			
	h	Total. Add lines 1a-1f		20,040			
	2-		Business Code	_			
	2a		_	_			
Program	b						_
Service	C						
Revenue	d						
	е						
		All other program service revenue					
	g	Total. Add lines 2a-2f	<u></u>	<u> </u>			}
	3	Investment income (including dividends, inter-					
		and other similar amounts)	•	242	242		
	4	Income from investment of tax-exempt bond p	proceeds	· [
	5	Royalties	<u>.</u> ▶	>			
		(ı) Real	(II) Personal				
	6a	Gross rents 8,2	97				
	b	Less rental expenses					
	С	Rental income or (loss) 8,2	97				
	d	Net rental income or (loss)		8,297	8,297		
		Gross amount from sales of (i) Securities	(II) Other			·	- · · · · · · · · · · · · · · · · · · ·
	'-	assets other than inventory		-			
	h	Less cost or other basis		=	•		
_	"	and sales expenses					1
O	c	Gain or (loss)	-				
'n		Net gain or (loss)		>			
е		Gross income from fundraising			· · · · · ·		
Г		events (not including \$ 7,038					
R		of contributions reported on line 1c)					
e		See Part IV, line 18	a 18,25	50			
ė	, h		b 20/20	-			
n		Net income or (loss) from fundraising events		18,250			10 250
u e		Gross income from gaming activities		10,230			18,250
•		O D - + D / 1 40	504.60	\1			
			a 584,60				
		, , , , , , , , , , , , , , , , , , , ,	b 470,68		112 016		- <i>-</i>
	l .	Net income or (loss) from gaming activities .	• • • • • • •	113,916	113,916		 ,
	10a	Gross sales of inventory, less	100.00				l i
	١.	returns and allowances					
		•	ь 213,08				
	С	Net income or (loss) from sales of inventory .	<u> </u>	(16,741) (16,741)	
	<u> </u>	Miscellaneous Revenue	Business Code				
		AMUSEMENT OTHER	900099	2,067	2,067		
	i .	RECOVERED BAD DEBT	900099	440	440		
	· -	ATM RECEIPTS	900099	1,152	1,152		
		All other revenue	900099	46			
	е	Total. Add lines 11a-11d		3,705			
	12	Total revenue. See instructions	•	147,709	109,419		0 18,250

Partix Statement of Functional Expenses

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

	· Check if Schedule O contains a response to any que	stion in this Part IX			
Do r	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21.	25,599	25,599		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	2,201	2,201		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States 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				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages			-	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	150		150	
С	Accounting	1,525		1,525	
d	Lobbying			· · · · · · · · · · · · · · · · · · ·	
е	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees				
g	Other	2,906			2,906
12	Advertising and promotion			,	
13	Office expenses	2,884		2,884	
14	Information technology	1,954		1,954	
15	Royalties	-,			
16	Occupancy	71,275	•	71,275	-
17	Travel	2,739		2,739	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	361		361	- · · · · · · · · · · · · · · · · · · ·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance		<u></u>		
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)				
а	NEWSLETTER	3,004		3,004	
b	DUES-NATL, DEPT, DISTRICT	4,719		4,719	
C	FLAGS-CEMETARY, FIELD, OTH	1,648		1,648	
d	OTHER EXPENSES	3,881		3,881	
e	All other expenses	520		520	
25	Total functional expenses. Add lines 1 through 24e	125,366	27,800	94,660	2,906
26	Joint costs. Complete this line only if the	123,300	27,800	34,000	2,306
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here following SOP 98-2 (ASC 958-720)				
	1011011111g 001 00-2 (100 000-120)				

Par	}X{	Balance Sheet			
			(A)		(B)
<u>. </u>			Beginning of year		End of year
	1.	Cash - non-interest-bearing	154,203	1	240,543
	2	Savings and temporary cash investments	67,834	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of	•		
		Schedule L	Beginning of year End of year 154,203 1 240,543		
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	ŀ	employers and sponsoring organizations of section 501(c)(9) voluntary			
s	Schedule L 6 Receivables from other disqualified persons (as of 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section employees' beneficiary organizations (see instruct the section of the section of section employees' beneficiary organizations (see instruct the section of section of the section of section of the se	employees' beneficiary organizations (see instructions)		6	
e	7	Notes and loans receivable, net		7	
S	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		 	
	-				
				ŀ	
	ь		398.221	10c	398.221
				 	
				1	<u> </u>
Assets 1 1 1 1 1 1 1 1 1 1 1 2 2 2 2 Neund ABaetances 1 3 3 3 3 3	i .				
	1			· · · · · · · · · · · · · · · · · · ·	
				+	638.764
	.	Accounts payable and accrued expenses			330,731
		Deferred revenue			
ŀ	20			1	
а	21	Escrow or custodial account liability Complete Part IV of Schedule D			
b	22	Payables to current and former officers, directors, trustees, key			
i		employees, highest compensated employees, and disqualified persons			
į		Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties		-	
е	24	Unsecured notes and loans payable to unrelated third parties			
5	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
				25	
	26	Total liabilities. Add lines 17 through 25		 	0
		Organizations that follow SFAS 117, check here ▶ ☐ and complete			
NF		lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets		27	
_	28	Temporarily restricted net assets			
Α	29	Permanently restricted net assets			
		Organizations that do not follow SFAS 117, check here ▶ ☒ and			
		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		+	398.221
о е	32	Retained earnings, endowment, accumulated income, or other funds		+	
r s	33	Total net assets or fund balances		_	· · · · · · · · · · · · · · · · · · ·
	34			+	
		Total national and not appropriate parameters	020,230		

Forn	1 990 (2011) VETERANS OF FOREIGN WARS-POST 392	54-111924	2	Pa	ige 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				K
•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	.47,7	709
2	Total expenses (must equal Part IX, column (A), line 25)		1	.25,3	366
3	Revenue less expenses Subtract line 2 from line 1			22,3	343
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		6	20,2	258
5	Other changes in net assets or fund balances (explain in Schedule O)			(3,	837)
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	6	38,7	764
Pa	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 📗 Accrual 🗍 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
			2c		

Both consolidated and separate basis

If the organization changed either its oversight process or selection process during the tax year, explain in

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

Schedule O

Separate basis

issued on a separate basis, consolidated basis, or both

Consolidated basis

3a

3b

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number VETERANS OF FOREIGN WARS-POST 392 54-1119242 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Did the organization inform all grantees, donors, 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 conferring impermissible private benefit? Part U Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a 2c Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register 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 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 7 **▶**\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 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 financial statements that describes the organization's accounting for conservation easements 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 the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

	Using the account to a second to the second			•			sets (contin	iueu)
3	Using the organization's acquisition, accession	, and other records	, check any	of the foll	owing that are a s	ignificant use of its		
•	collection items (check all that apply)	. —						
а	Rublic exhibition		an or excha	nge progr	ams			
b	Scholarly research	e 🗌 Oth	ner					
С	Preservation for future generations							
4	Provide a description of the organization's colle	ections and explain	how they f	urther the	organization's exe	mpt purpose in		
	Part XIV							
5	During the year, did the organization solicit or r					ır	_	_
	assets to be sold to raise funds rather than to be			<u> </u>			. 🗌 Yes	☐ No
Pa	Escrow and Custodial Arra Part IV, line 9, or reported an amou	•		-	answered "Yes" t	o Form 990,		
1a	Is the organization an agent, trustee, custodian	or other intermedia	ary for conf	ributions o	r other assets not	• • • • •	·	
							. Tyes	∏ No
b	If "Yes," explain the arrangement in Part XIV a						• -	
		,	3		Γ	Amo	ount	
С	Beginning balance					1c		
d	Additions during the year				· -	1d		
е						1e		
f	Ending balance					1f		
2a	Did the organization include an amount on For						. Tyes	□No
b	If "Yes," explain the arrangement in Part XIV	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					• 🗀	
Par		if the organization	answered '	Yes" to Fo	rm 990. Part IV. I	ne 10		
[U		(a) Current year	T	or year	(c) Two years back	(d) Three years back	(e) Four yea	rs back
1a	Beginning of year balance	(-,	(-,		(5) 1.10) 00.10 020.1	(5)55 /52.5 220	(0) 100. 100	
b	Contributions		+					
c	Net investment earnings, gains, and losses		 					
d	Grants or scholarships		+					
e	Other expenditures for facilities		+					
·								
f	Administrative expenses		 					
g			 					
2	Provide the estimated percentage of the currer	t year end balance	(line 1g. e	olumn (a))	hold as			
a	Board designated or quasi-endowment	" year end balance	(iiiie ig, c	Julilli (a))	neid as			
b	Permanent endowment > %							
-	Temporarily restricted endowment	%						
С								
20	The percentages in lines 2a, 2b, and 2c should Are there endowment funds not in the possess	•	44	اسمد اسلمط		L_		
3a	organization by	non of the organizat	ion that are	neio ano	auministered for t	ne	[v-	
	•						Ye	s No
	(i) unrelated organizations		• • • • •	• • • • •		• • • • • • • • • • •	3a(i)	
						• • • • • • • • • • •	3a(ii)	-
b	If "Yes" to 3a(II), are the related organizations I	•			• • • • • • • •	• • • • • • • • • • •	3b	
4	Describe in Part XIV the intended uses of the d					· ·	· · · · · ·	
Hal	Land, Buildings, and Equip	T				<u> </u>		
	Description of property	(a) Cost or oth		1	t or other (other)	(c) Accumulated depreciation	(d) Book val	ue
1a	Land	[
b	Buildings							
С	Leasehold improvements							
d	Equipment							
е	Other STMD		398,221				3:	98,221
Total	. Add lines 1a through 1e (Column (d) must eq		X, column	(B), line 1	0(c))		3:	98,221

PartVIII	Investments - Other Securities. S	ee Form 990, Part X, line 12		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market	
(1) Financial o	derivatives			
	eld equity interests			
(3) Other				
(A)				·
(B)				
(C)				
(D)				
(E)				-
(F)				
(G)				
(H)				
(I)				
	b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		
PartVIII	Investments - Program Related.	See Form 990, Part X, line 13		····
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1)		l	occition one or your market	
(2)				
(3)				
(4)		<u> </u>		
(5)			- 	<u> </u>
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Partix	Other Assets. See Form 990, Part X, line	15		
	(a)	Description		(b) Book value
(1)				
(2)				
(3)	· · · · · · · · · · · · · · · · · · ·			<u> </u>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	in (b) must equal Form 990, Part X, col (B) line	IE \		<u>_</u>
Part X	Other Liabilities. See Form 990, Part X, I		· · · · · · · · · · · · · · · · · · ·	
1.	(a) Description of liability	(b) Book value		
	income taxes	(b) Book value		
(2)	miconic taxes			
(3)			-	
(4)		1	-	
(5)		<u> </u>	-	
(6)				
(7)				
(8)				
(9)		1		
(10)		<u> </u>		
(11)	· - · · · · · · · · · · · · · · · · · ·			
		ŀ		
	b) must equal Form 990, Part X, col (B) line 25)			

<u> ലവ</u>	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	tements	
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	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per	r 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		
þ	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
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	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Retu	ırn
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		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
_ C		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
_	Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1i		
	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)	
nis p	art to provide any additional information		
			
			
		-	

VETERANS OF FOREIGN WARS-POST 392

Schedule D (Form 990) 2011

Page 4

54-1119242

· SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities
Complete if the organization enswered "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

2011

Open to Public Inspection

Employer identification number

Department of the Treasury * Internal Revenue Service Name of the organization

ETERANS OF FOREIGN	WARS-POST	392			54-1	<u> 119242</u>
Fundraising Activitie				ered "Yes" to Form	990, Part IV, line 17	•
Form 990-EZ filers are r				-44	41	
Indicate whether the organization Mail solicitations	raised funds throu					
Internet and email solicitations				of non-government good of government grant		
Phone solicitations				-	5	
In-person solicitations		g ∐	Special fur	ndraising events		
Did the organization have a writte	n or oral agreeme	at with any ind	hudual (iac	duding officers, direct	ara truatana	
or key employees listed in Form 9						es No
If "Yes," list the ten highest paid in						
compensated at least \$5,000 by the		s (luliulaiseis) puisuain	to agreements under	Willow the full dialset is	to be
	io organization					
		(iii) Did fundr	aiser have		(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody or o		(N) Gross receipts from activity	(or retained by)	(or retained by)
		contribu	tions?	nom down,	fundraiser listed in col (i)	organization
		Yes	No			
				1		
						1
···						
· · · · · · · · · · · · · · · · · · ·	 					-
		-				
			_			
						1.
						-
			<u> </u>			
II				<u> </u>	L	
List all states in which the organiza	ition is registered o	or licensed to s	solicit conti	ributions or has been	notified it is exempt froi	m
registration or licensing						
						
·						
						
"				· -	<u> </u>	
					····	
					~ <u>~</u>	
•	·					

PartII Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events Add col (a) through BUDDY POPPIE None ∞l (c)) R (total number) (event type) (event type) е ٧ Gross receipts 25,288 25,288 е n 2 Less Charitable contributions 7,038 7,038 Gross income (line 1 minus 18,250 18,250 D Noncash prizes е С Rent/facility costs..... t Ε Food and beverages Х р Entertainment..... е n s Other direct expenses е Net income summary Combine line 3, column (d), and line 10........ 18,250 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 584,601 584,601 Gross revenue D rect 2 Cash prizes. 446,598 446,598 Noncash prizes Expenses Rent/facility costs 24,087 Other direct expenses 24,087 Yes Yes Volunteer labor 470,685) 113,916 9 Enter the state(s) in which the organization operates gaming activities VA, Is the organization licensed to operate gaming activities in each of these states?..... If "No," explain EXEMPT b If "Yes," explain

34160	421119242		Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes 🔀	No
12	The state of a factor of the state of a factor of a partition of the state of the s		
	formed to administer charitable gaming?	Yes 🔀	No
13	Indicate the percentage of gaming activity operated in		
а		0.000	
b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and		
	records		
	N		
	Name ► JOSEPH P HALZACK		
	Address ► 1106 SNOWBIRD LANE Virginia Beach, VA 23454		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	Yes ∐X	No
þ	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the		
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party		
	Name •		
	Address ▶		
16	Gaming manager information		
	Name ► JOSEPH P HALZACK		
	Gaming manager compensation ▶ \$		
	Description of services provided ► GENERAL CANTEEN AND GAMING MGMT		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	,		
а	Same and the same	_	
_	retain the state gaming license?	Yes 🔀	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year		
<u> Pa</u>	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,		
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).		
	part to provide any additional information (see instructions).		
-			

SCHEDULEI (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

▶ Attach to Form 990.

2011

OMB No 1545-0047

Open to Public

≥ \boxtimes (h) Purpose of grant or assistance X Yes Employer identification number 54-1119242 (g) Description of non-cash assistance to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes (f) Method of valuation (book, FMV, appraisal, Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? (d) Amount of cash grant (c) IRC section if applicable Part II can be duplicated if additional space is needed Partil General Information on Grants and Assistance (p) EIN VETERANS OF FOREIGN WARS-POST 392 (a) Name and address of organization or government Name of the organization Penil (10) (11) Ξ 2 (E) ₹ 3 9 8 6 8

Schedule I (Form 990) (2011)

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(12)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2011)

Page 2

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(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	,
1					
2					
8					
4					
ro.					
9					
7					
Parelly Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	is part to provide the	he information require	ed in Part I, line 2, and	any other additional infor	nation.
Monitoring procedures (Part I, line 2)			:		
THE OFFICE STAFF MAINTAIN THE RECORDS OF	RECORDS OF THE GRANTS. E	ACH TIME AN INIT	LIAL GRANT IS MAI	E, THEIR PROPOSAL I	EACH TIME AN INITIAL GRANT IS MADE, THEIR PROPOSAL IS PRESENTED TO THE FLOOR FOR A
MEMBERSHIP VOTE. THE VOTE IS LARGELY BASED ON THE PROPOSAL,	ED ON THE PROP		THE AMOUNT REQUESTED, AND	IT'S APPLICABILITY	AND IT'S APPLICABILITY TO THE EXEMPT PURPOSE AND MISSION
OF THE POST.					

· SCHEDULE O (Form 990 or 990-EZ)

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.

► Attach to Form 990 or 990-EZ.

2011

OMB No 1545-0047

Open to Public Inspection

Employer identification number

54-1119242

Department of the Treasury Internal Revenue Service Name of the organization

VETERANS OF FOREIGN WARS-POST 392

01. Members or stockholder classes and rights (Part VI, line 6)
THIS ORGANIZATION IS A VETERANS ORGANIZATION CREATED AS A TAX EXEMPT CORPORATION WITH A
MEMBERSHIP BASED ON THE QUALIFICATIONS IN THEIR CHARTER.
02. Member election for additional members (Part VI, line 7a)
ALL MEMBERS VOTE ANNUALLY ON WHO IS TO SERVE AS THE ORGANIZATION'S GOVERNING BODY.
03. Governing body decisions (Part VI, line 7b)
THIS ORGANIZATION MAKES ALL MAJOR DECISIONS BASED ON A FLOOR VOTE OF OF IT'S MEMBERS. THE
GOVERNING BODY OF OFFICERS CAN MAKE DECISIONS IN AN EMERGENCY SITUATION AND CAN LATER
PRESENT IT'S EMERGENCY DECISION TO IT'S MEMBERS IF EVER NECESSARY.
04. Form 990 governing body review (Part VI, line 11)
BEFORE A FORM 990 TAX RETURN IS MAILED TO IRS, THE QUARTERMASTER DOES A DETAILED REVIEW
AND SATISFIES HIS QUESTIONS, IF ANY, WITH THE CPA. IT'S THEN PRESENTED BY THE
QUARTERMASTER TO THE OFFICERS AND TRUSTEES OF THE POST AT A POST MEETING. AFTER ALL HAVE
REVIEWED THE RETURN, THE POST COMMANDER AND THREE TRUSTEES SIGN AS REVIEWERS, THE
QUARTERMASTER SIGNS THE ACTUAL RETURN, AND IT'S THEN MAILED.
05. Conflict of interest policy compliance (Part VI, line 12c)
CONFLICT OF INTEREST POLICIES ARE DETERMINED AT THE HEADQUARTERS LEVEL. EACH MAJOR
ECONOMIC DECISION IS TAKEN TO THE FLOOR FOR A MEMBERSHIP VOTE AND ANY CONFLICT OF
INTERESTS ARE THEN DETERMINED AT THAT TIME.
06. Governing documents, etc, available to public (Part VI, line 19)

FINANCIAL STATEMENTS AND OTHER POLICIES ARE DISPLAYED ON A POST BULITIN BOARD IN THE

EEA

Schedule O (Form 990 or 990-EZ) (2011)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

• Schedule O (Form 990 or 990-EZ) (2011)		Page 2
Name of the organization	Employer identification number	
VETERANS OF FOREIGN WARS-POST 392	54-1119242	
GENERAL OFFICE AREA. THEY ARE AVAILABLE TO ANY INTERESTED PARTY UPON REQUES	т.	
07. Explanation of other changes in net assets or fund balances (Part XI, 1	ine 5)	
TAXPAYER LARGELY USES A SINGLE ENTRY SYSTEM WHERE PRIOR PERIOD ADJUSTMENTS	ARE SOMETIMES	
NECESSARY. THIS IS SUCH AN ENTRY.		
 		
	···········	

Name(s) as shown on return	ederal Supporting	Statements		011	PG01
VETERANS OF FOREIGN WAR	RS-POST 392				119242
Form 990), Schedule D, Investments -		1e	Sta	tement #D1e
Description of Investment LAND AND BUILDING	Cost/basis (Investment) 398,221	Cost/basis (Other)	Depr	0	Book <u>Value</u> 398,221
Total	398,221			0	398,221

VFW Post 392

most won	No	FY2011	Gaming	Canteen	Post	Total		
		Revenues						124
Part VIII	10	Buddy Poppy Sales			\$11,701.82	\$11,701.82		25.317.18
	1c	Donations Received		\$3,541.82	\$3,496.02	\$7,037.84		<29.00
	10	Fund Raisers		\$2,995.67	\$3,581.85	\$6,577.52		1 25,288,18
							\$25,317.18	<18,250. ∝
Part VIII	1b	Dues, Annual member			\$6,392.00	\$6,392.00		7038.18
	16	Dues, Lfe Installment Payment				\$0.00		
	1b	Dues, Life Membership			\$700.00	\$700.00		
	1b	Nat Reimburse Annual Dues				\$0.00		
	1b	Rebate From Dept, Annual Mbr				\$0.00		
	1b	Rebate From Nat'l, Life Mbrs			\$5,910.36	\$5,910.36		Part VIII
	1						\$13,002.36	(B)
Part VIII	3	Interest earned (Checking)	\$15.26	\$2.94	\$3.13	\$21.33		THE DAY
		Interest Earned (Investments)	\$220.91			\$220.91		
	П						\$242.24	<u>)</u>
Part VIII	ба	Hall Rental Cleaning Deposit		\$725.00		\$725.00		
	6a	Rental, Equipment		\$75.00		\$75.00		
	1	Rental, Hall		\$6,270.00		\$6,270.00		
	ea	Rental, Kitchen		\$136.26		\$136.26		
	6a	Rental, Personal Lockers		\$1,091.00		\$1,091.00		1/2 / X/2 /
							\$8,297.26	(2)
		Sale of Assets						
Part VIII	9a	Pop Open Sales, Fish Tank	\$22,820.00			\$22,820.00		
	9a	Pop Open Sales, Machine	\$561,781.00			\$561,781.00		1867 XI
							\$584,601.00	(d/b) /
Part VIII	10a	Sale of Memorabilia			\$942.20	\$942.20		
	10a	Sales - bottled beer		\$65,912.62		\$65,912.62		
	10a	Sales - setups		\$15,256.50		\$15,256.50		
				\$8,560.70		\$8,560.70		
	10a	Sales / wine		\$7,172.63		\$7,172.63		
	10a	Sales - draft beer		\$23,818.85		\$23,818.85		
	10a	10a Sales - food		\$50,876.81		\$50,876.81		
								1 47.40

STMT 1 P.1

VFW Post 392

	•		•			Part TIT	(10A) GROSS SALES		<u>බ</u> ්) ((-	(all)		(10)						100 VIII		(48) COM/~8 * 14~:												/ 1423
								\$196,339.05						\$3,705.20	\$831,504.29						\$470,685.03												
0000	\$0.00	\$1,011.28	\$7,700.87	\$10,096.28	\$1,532.03	\$683.12	\$2,775.16		\$2,066.75	\$0.00	\$46.45	\$440.00	\$1,152.00	\$0.00			\$429,043.00	\$17,555.00	\$310.00	\$23,777.03		\$1,348.52	\$3,586.29	\$2,136.04	\$2,607.24	\$2,129.88	\$9,000.00	\$0.00	\$340.00	\$1,665.68	\$62,010.49	\$29,419.21	\$7,193.43
																	1 865 94/2		24,087.					\$2,136.04						\$1,665.68			
		\$1,011.28	\$7,700.87	\$10,096.28	\$1,532.03	\$683.12	\$2,775.16		\$2,066.75		\$46.45	\$380.00	\$1,152.00										\$3,586.29		\$2,607.24	\$2,129.88	\$9,000.00		\$340.00		\$62,010.49	\$29,419.21	\$7,193.43
												\$60.00					\$429,043.00	\$17,555.00	\$310.00	\$23,777.03		\$1,348.52											
	10a Sales - dart supplies	10a Sales - party kegs	10a Sales - cigarettes	Sales - bottled beer S/H	Sales - soda / juice S/H	_			Amusement Machine Receipts	Gift Certificate	11d Miscellaneous / Other Income	Recovered Bad Debt	_		Total Revenues	Cost of Sales	Prizes awarded - daily machine	Prizes awarded - daily tank	Ticket Machine Repairs	Ticket Purchases		10b Admin supplies -	10b Bar Supplies -	Buddy Poppy Supplies	Cleaning Supplies -	Consumable paper products -		10b Equip purchases - Ticket Machine	10b License expense	10b Memorabilia Expense	10b Payroll -	Purchase - Bottle Beer	Purchase - Cigarettes
	10a	10a	10a	10a	10a	10a	_			ļ	├	+-	_				98	96	96	1		—	-	10 01	10b	10b	10b	10b	10b	10b	10b	10b	100
							 - 				Part VIII						Part VIII					Part VIII											

VFW Post 392

	•	•				144 1.00	٠,	(10B) DIMPECT LOS!	24167 10			1	(E) OFFX!																			STMT 1 83/9
								\$213,080.23	\$683,765.26	\$147,739.03			\$29.00																			
\$36,870.50	\$15,271.00	\$3,493.74	\$3,387.23	\$4,502.95	\$1,142.13	\$22,964.16	\$4,011.74					\$29.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$392.00	\$0.00	\$0.00	\$1,200.00	\$4,799.34	\$215.98	\$0.00	\$100.00	\$200.00	\$200.00	\$200.00	\$743.68	\$25.00	
																							\$4,799.34				\$200.00	\$200.00				
\$36,870.50	\$15,271.00	\$3,493.74	\$3,387.23	\$4,502.95	\$1,142.13	\$22,964.16	\$4,011.74		,			\$29.00																				
																			\$392.00			\$1,200.00		\$215.98		\$100.00			\$200.00	\$743.68	\$25.00	
10b Purchase - Food	10b Purchase - Keg Beer	10b Purchase - Soda / Juice	10b Purchase - Wine	Trash removal	Kitchen Supplies	Federal Payroll Tax Expense	Virginia Payroll Tax Expense		Total Cost of Sales	Gross Profit	Expenses	Refund to patron		229th Military Police	Afghanistan Children's Relief	Adopt-A-Unit	American Cancer Society	American Heart Association	Annual Bike Run Expense/Share	ANA- Flame of Hope	Beruit Walk	Boy Scout Troop 392	Buddy Poppy share to LAux	Christmas Decorations	Charitable Contributions	Children's Angel Tree	Children's Christmas party	Children's Halloween party	Christmas Baskets	Community Awards Ceremony	СНКД	
10b F	10b F	10b	10b F	10b T	10b X	10b F	10b V			9	E	L.		1 2	1 A	1 A	1 A	1 A	1 A	1	1 B	1 B	1 8	1	1	1	1 0	1 0	1	1	1	
														Part IX																		

VFW Post 392

1 Dausev Possee Poker Run						
1					\$0.00	
1 FOP Lodge #8 - Shop w/ a Cop	cop				\$0.00	
Dept of Virginia Fundraiser					\$0.00	
Deputy Sheriff of the Year					\$0.00	
Eagle Scout Awards		\$392.00			\$392.00	
Easter Egg Hunt					\$0.00	
EMT of the Year		\$200.00			\$200.00	
Equi-Kids					\$0.00	
Fireman of the Year					\$0.00	
Flame of Hope					\$0.00	
Gold Hole Sponsor, CPO Assoc S/L	soc S/L	\$250.00			\$250.00	
Hampton Rds Council of VA org	org	\$100.00			\$100.00	
General MacArthur Foundation	tion	\$500.00			\$500.00	
Homecoming Events					\$0.00	
Honor & Rememberance					\$0.00	
Hope for the Warriors					\$0.00	
Horton Wreath Society					\$0.00	
Isaak Walton League		\$392.00			\$392.00	
Joy Fund		\$392.00			\$392.00	
Kids Wish Network					\$0.00	
Ladies Auxiliary Donation		\$3,600.00			\$3,600.00	
LAUX - Cancer Aid and Research	arch	\$2,000.00			\$2,000.00	
Little League Softball Team		\$392.00			\$392.00	
Muscular Distrophy Association	ition				\$0.00	
Make-A-Difference Day					\$0.00	
Mercy Medical Airlift					\$0.00	
Military Asst Prog. Dept of VA	٧A		,		\$0.00	
Morgan Scholars					\$0.00	
MWR Wilderness Challenge	i				\$0.00	
National Wheelchair Sports Fdtn	Fdtn	\$225.00			\$225.00	
National Home, VFW			;\$	\$500.00	\$500.00	
Navy/Marine Corps Relief					\$0.00	
NJROTC		\$1,000.00			\$1,000.00	
Operation Holiday Spirit					\$0.00	

STMT 1

VFW Post 392

Operation PFP
Patriot's Pen Scholarships
Red Horse Transportation Squad.
Salty Dawgs Bike Run(Fisher House)
US Association of Blind Athletes
!
VA Veterans Care Center - OHS
VB Police Supervisors Association

STMT 1 P5/9

VFW Post 392

	•											PART IX	Ş		, i	GRANTS TO LNUIV.	PART IX	(7)		40/	Part TX			NA TA	(1/6)								stmt 1 86/9
													\$25,599.43					\$2,200.72				•	\$1,525.00		\$150.00								
\$550.00	\$392.00	\$500.00	\$0.00	\$100.00	\$0.00	\$350.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,200.72	\$0.00	\$0.00	\$0.00				\$1,525.00	\$0.00		\$150.00		\$504.95	\$413.99	\$142.79	\$45.41	\$739.18	\$765.70	\$103.00	
\$550.00		\$500.00												\$2,200.72										\$150.00		\$504.95	\$413.99	\$142.79	\$45.41	\$366.45	\$79.97	\$103.00	
																														\$211.73			
	\$392.00			\$100.00		\$350.00												:			\$1,525.00									\$161.00	\$685.73		
Vetshouse Inc	VFW Laux. JR Girls Unit 4809	VFW National Military Service	Vietnam War Memorial Fund	Virginia War Memorial	Va Wounded Warriors Program	VOD Scholarships	Naval Special Warfare Foundation	Marine Corp Unit 24	Fisher House	Vets Memorial VA Beach	Juvenile Diabetes Foundation	Zachary Lamb Service Dogs		Veterans' Aid and Assistance	Veterans' In Distress	Veterans' Assistance Mileage					990 Tax Preparation	SSA W2/W3		Corporation Legal Fees		Award Supplies	Cdr's & Officers Hats & Tags	Cemetery Details for food/beve	Community Services Book	Office / Admin Expense	Office Equipment - Hard/Soft	Past Commander's Pin	
-	П	1	1	1	1	1	1	1	1	1	1	1		(2	2	2	2				11c	11c		11b		(13	13	13	13	13	13	13	
														Part IX						:	Part IX			Part IX		Part IX							

9

VFW Post 392

13 FUNDRAISER 119 FUNDRAISER EXPS. PART IX TUPO TRUE /TEL \$2,883.70 \$2,906.45 \$1,954.38 \$0.00 \$1,808.95 \$7,027.26 \$0.00 \$0.00 \$0.00 \$168.68 \$2,906.45 \$145.43 \$1,386.72 \$1,460.65 \$0.00 \$0.00 \$304.63 \$502.00 \$2,133.51 \$14,773.01 \$1,217.82 \$885.70 \$652.68 \$13,255.00 \$3,946.29 \$135.00 \$330.00 \$252.00 \$1,118.64 \$1,744.29 \$1,489.30 \$10,537.38 \$7,315.73 \$807.61 Statement of Revenues and Expenses Year Ending 6/30/2012 \$168.68 \$2,155.72 \$145.43 \$502.00 \$750.73 \$885.70 \$3,946.29 \$8,746.38 \$2,783.44 \$700.00 \$135.00 \$1,489.30 \$7,027.26 \$13,255.00 \$1,791.00 \$4,532.29 \$304.63 \$1,808.95 \$2,133.51 \$1,386.72 \$14,773.01 \$1,217.82 \$1,460.65 \$652.68 \$330.00 \$252.00 \$1,118.64 \$1,744.29 \$107.61 Cox Telephone/Internet Service 16 Bonding of Officers/Employees Equipment Purchase, Grounds 16 | Maintenance - Miscellaneous 16 Equipment Purchase, Kitchen 16 Stage Remodeling - Main Hall 13 Deceased Members Board 16 Equipment Purchase, Halls 16 Equipment Purchase, Misc 16 |Maintenance - Equipment Equipment Purchase, Bar 16 | Dominion Virginia Power Chairs & Table Purchase 16 Sam's Club Membership 16 | Maintenance - Grounds Maintenance - Building Stanley Plant Security Fund raisers expense City treasurer, Water 16 Virginia Natural Gas Recruiting Expense Insurance Expense 16 Cintas Rug Rental Internet Services 16 |Laundry Expense Kitchen Remodel Copy Data of VA 16 |Fire Prevention 16 |Pest Control 16 DirectTV 16 HRSD 16 16 16 16 16 14 16 16 16 16 16 14 Part IX Part IX Part IX

VFW Post 392

	•		•	インへか	K	ì	X CALTER	17140					`	<u>.</u> k	4								RINGES	*							d say			6/00
				0664/	1287 X	9	1	474						2, 1	= [CONFER	× ()	(4)				,	7000	346			STOT
						\$71,275.22		\$3,004.25								\$2,739.06									\$361.04						\$4,719.00			
00.00	מסימר	\$0.00	\$0.00	\$0.00	\$0.00		\$3,004.25		\$1,800.00	\$0.00	\$605.71	\$300.00	\$33.35	\$0.00	\$0.00				\$336.04		\$25.00	\$0.00				\$1,334.50		\$879.00	\$1,805.50	\$700.00		\$73.23	\$238.02	
	1						\$3,004.25											\$400.00	\$336.04		\$25.00		\$500.00			\$1,334.50		\$879.00	\$1,805.50	\$700.00		\$73.23	\$238.02	
									\$1,800.00																									
						\$3,708.00					\$605.71	\$300.00	\$33.35																, ,					
	Patio Structure	Kitchen - Move Drain Pipe	_	_	-	+			Managers Gasoline Expense	1	_	$\overline{}$	Quartermaster's Expenses	Safety Officer	Service Officer Expenses		Cdr for Nat'l Convention	Dept Convention - Hospitality Rm	_	1	National Conv' Registration	1	_	$\overline{}$		24b Dues, Dept, Annual	24b Dues, Dept, Application	24b Dues, District	24b Dues, National, Annual	Dues, National, Life		Flags, Community Support	Flags,	
	16	16	16	16	16	16	Part IX 24a	┿	Part IX 17	17	17	17	17	17	17		Part IX 19	19	19	19	19	19	19	19		Part IX 24b	24t	241	241	24b		Part IX 24c	+	

	FL065	{	$\tilde{\mathcal{O}}$	•					SOX & OFFICE	ONEN LY	<u>`</u> [-	So Deni	\sim				
	FLAL	WA/	\$1,647.47							34		\$3,881.46	\$520.00 4(246	\$125,396.18	\$22,342.85		
	g 6/30/2012	\$1,336.22	\$		\$1,158.54	\$425.36	\$477.63	\$289.93	\$30.00	\$0.00	\$1,500.00	\$	\$520.00	\$1	\$		
.	es Year Endin	\$1,336.22			\$1,158.54	\$2.00	\$477.63	\$289.93	\$30.00								
	s and Expens					\$257.79							\$460.00				
	Statement of Revenues and Expenses Year Ending 6/30/2012					\$165.57					\$1,500.00		\$60.00				
	Statem	24c Flags, Cemetery		24d Parade Expenses	24d Annual Picnic Expense	24d Bank Charges	24d Flowers, Fruit Baskets, Cards	24d Installation Dinner/Dance	24d Reimburse member	24d Post New Years Party	Christmas Gifts to Employees		Bad Debt Expense	Total Expenses	Net Income		
		24c		Part IX 24d	24d	24d	24d	24d	24d	24d	24d		Part IX 24e	+			

VFW Post 392

Statement 2

VFW Post 392 July 1, 2011-June 30, 2012

PART III

Purpose: The purpose of this corporation shall be fraternal, patriotic, historical, and educational; to preserve and strengthen comradeship among it's members; to assist worthy comrades; to perpetuate the memory and history of our dead, and to assist their widows and orphans; to maintain true allegiance to the Government of the United States of America, and fidelity to it's Constitution and laws; to foster true patriotism; to maintain and extend the institutions of American freedom, and to preserve and defend the United States from all of her enemies, whomsoever.

All funds received and expended are in direct support of the corporation's purpose stated above and are detailed in the attached schedules.