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### **Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:  
**To provide support for veterans and community groups.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? .....  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? .....  Yes  No  
If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4b (Code ) ( Expenses \$ including grants of \$ ) ( Revenue \$ )**

4c (Code ) ( Expenses \$ including grants of \$ ) ( Revenue \$ )

**4d Other program services (Describe in Schedule O.)**

(Expenses \$**1,000,000**) including grants of \$**1,000,000**) (Revenue \$**1,000,000**)

**4e Total program service expenses**

**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	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	2	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	3	X
4	<b>Section 501(c)(3) organizations.</b> 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 . . . . .	N/A	
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 . . . . .	N/A	
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 . . . . .		
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 . . . . .	6	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	7	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 . . . . .	8	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 . . . . .	9	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	10	X
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	11a	X
b	Did the organization report an amount for investments -- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	11b	X
c	Did the organization report an amount for investments -- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	11c	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	11d	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	11e	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . .	11f	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	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .	12b	X
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, investment, & program service activities outside the United States, or aggregate foreign investments valued at \$100,00 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	14b	X
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	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV . . . . .	16	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	17	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	18	X
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	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	20a	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	20b	

## Part IV Checklist of Required Schedules (continued)

		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	X
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	
c	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	N/A
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .	25a	X
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	X
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):		
a	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
c	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, 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	X
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	X
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	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 meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	35b	X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	36	N/A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI . . . . .	37	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? . . . . .	38	X
<b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .			

**Part V****Statements Regarding Other IRS Filings and Tax Compliance**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
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . .	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	X
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	2a	5
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .	2b	X
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a	X
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	5c	
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	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		N/A
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>	7a	X
a	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? . . . . .	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7c	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7e	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7f	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7g	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7h	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	8	X
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b>	9a	X
Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .			
9	<b>Sponsoring organizations maintaining donor advised funds.</b>	9b	X
a	Did the organization make any taxable distributions under section 4966? . . . . .		
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		
10	<b>Section 501(c)(7) organizations.</b> Enter:	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .		
11	<b>Section 501(c)(12) organizations.</b> Enter:	11a	
a	Gross income from members or shareholders . . . . .	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	13a	X
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . .		
<b>Note.</b> 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 . . . . .	13b	
c	Enter the amount of reserves on hand . . . . .	13c	
14a	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 . . . . .	N/A	
		14b	

**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.

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

**Section A. Governing Body and Management**

	Yes	No
1a		
1b		
2		X
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b	X	
9		X

1a Enter the number of voting members of the governing body at the end of the tax year. . . . .  
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.

1b Enter the number of voting members included in line 1a, above, who are independent . . . . .

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . .

4 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? . . . . .

6 Did the organization have members or stockholders? . . . . .

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, stockholders, or persons other than the governing body? . . . . .

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body? . . . . .

b Each committee with authority to act on behalf of the governing body? . . . . .

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . .

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a		X
10b		
11a	X	
12a		X
12b		
12c		
13	X	
14	X	
15a		X
15b		X
16a		X
16b		

10a Did the organization have local chapters, branches, or affiliates? . . . . .

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? . . . . . N/A

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 . . . . .

b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . . N/A

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . . N/A

13 Did the organization have a written whistleblower policy? . . . . .

14 Did the organization have a written document retention and destruction policy? . . . . .

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?

a The organization's CEO, Executive Director, or top management official . . . . .

b 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? . . . . .

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 taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . N/A

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ► AK

18 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 made these available. Check all that apply.

Own website  Another's website  Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 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 records of the organization: ► See attachment #1

**Part VII****Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organiza- tions in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)										(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		I N D U R I S E V T C I D O R A L	T R I S T U T E C I T O R A L	D I S T U T E C I T O R A L	O F I C I C E R O R A L	K E M P L O Y E E S T A T E D	C E M P L O Y E E S T A T E D	H G I M P H E E S T A T E D	C O M P L E E S T A T E D	F O R M E R				
Alvin Moye'	20.00			X							0	0	0	
Commander														
Johnathon R Hackett	20.00			X							0	0	0	
Sr Vice Commander	20.00													
Rodney Reno														
Jr. Vice Commander	20.00			X							0	0	0	
Gary Kurpius														
Adjutant	20.00				X						19,200	0	0	
John Minnick														
Quartermaster	20.00			X	X						21,600	0	0	
Clarence Albright														
Judge Advocate	20.00				X						0	0	0	
Joseph Simms														
Chief of Staff	20.00			X							0	0	0	

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►

## Part VIII

## **Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
G O T H E R S R I M B A M U N L T S R O A A N N D T S	<p><b>1a</b> Federated campaigns .....</p> <p><b>b</b> Membership dues .....</p> <p><b>c</b> Fundraising events .....</p> <p><b>d</b> Related organizations .....</p> <p><b>e</b> Government grants (contributions) .....</p> <p><b>f</b> All other contributions, gifts, grants, &amp; similar amounts not included above .....</p> <p><b>g</b> Noncash contributions included in lines 1a-1f \$ .....</p> <p><b>h</b> <b>Total.</b> Add lines 1a-1f .....</p>	<p><b>1a</b></p> <p><b>1b</b> 37,675</p> <p><b>1c</b></p> <p><b>1d</b> 25,500</p> <p><b>1e</b></p> <p><b>1f</b> 273,717</p> <p><b>1g</b></p> <p><b>1h</b> ► 336,892</p>			
P R O G E R R A V E M I V C E E N U E	<p><b>2a</b> Program Service Revenue</p> <p><b>b</b></p> <p><b>c</b></p> <p><b>d</b></p> <p><b>e</b></p> <p><b>f</b> All other program service revenue .....</p> <p><b>g</b> <b>Total.</b> Add lines 2a-2f .....</p>	<p><b>2a</b></p> <p><b>2b</b></p> <p><b>2c</b></p> <p><b>2d</b></p> <p><b>2e</b></p> <p><b>2f</b> ► 6,077</p> <p><b>2g</b></p>	<b>Business Code</b>	6,077	6,077
O T H E R R E V E N U E	<p><b>3</b> Investment income (including dividends, interest, and other similar amounts) .....</p> <p><b>4</b> Income from investment of tax-exempt bond proceeds .....</p> <p><b>5</b> Royalties .....</p> <p><b>6a</b> Gross Rents .....</p> <p><b>b</b> Less: rental expenses</p> <p><b>c</b> Rental income or (loss)</p> <p><b>d</b> Net rental income or (loss) .....</p> <p><b>7a</b> Gross amount from sales of assets other than inventory .....</p> <p><b>b</b> Less: cost or other basis and sales expenses .....</p> <p><b>c</b> Gain or (loss) .....</p> <p><b>d</b> Net gain or (loss) .....</p> <p><b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 .....</p> <p><b>b</b> Less: direct expenses .....</p> <p><b>c</b> Net income or (loss) from fundraising events .....</p> <p><b>9a</b> Gross income from gaming activities. See Part IV, line 19 .....</p> <p><b>b</b> Less: direct expenses .....</p> <p><b>c</b> Net income or (loss) from gaming activities .....</p> <p><b>10a</b> Gross sales of inventory, less returns and allowances .....</p> <p><b>b</b> Less: cost of goods sold .....</p> <p><b>c</b> Net income or (loss) from sales of inventory .....</p>	<p><b>3</b></p> <p><b>4</b></p> <p><b>5</b></p> <p><b>6a</b></p> <p><b>6b</b></p> <p><b>6c</b></p> <p><b>6d</b> ►</p> <p><b>7a</b></p> <p><b>7b</b></p> <p><b>7c</b></p> <p><b>7d</b> ►</p> <p><b>8a</b></p> <p><b>8b</b></p> <p><b>8c</b></p> <p><b>9a</b></p> <p><b>9b</b></p> <p><b>9c</b></p> <p><b>10a</b></p> <p><b>10b</b></p> <p><b>10c</b></p>	<p><b>3</b> ► 12,036</p> <p><b>4</b></p> <p><b>5</b></p> <p><b>6a</b></p> <p><b>6b</b></p> <p><b>6c</b></p> <p><b>6d</b> ►</p> <p><b>7a</b></p> <p><b>7b</b></p> <p><b>7c</b></p> <p><b>7d</b> ►</p> <p><b>8a</b></p> <p><b>8b</b></p> <p><b>8c</b></p> <p><b>9a</b></p> <p><b>9b</b></p> <p><b>9c</b></p> <p><b>10a</b></p> <p><b>10b</b></p> <p><b>10c</b></p>	12,036	12,036
	<p><b>11a</b></p> <p><b>b</b></p> <p><b>c</b></p> <p><b>d</b> All other revenue .....</p> <p><b>e</b> <b>Total.</b> Add lines 11a-11d .....</p> <p><b>12</b> <b>Total revenue.</b> See instructions .....</p>	<p><b>11a</b></p> <p><b>11b</b></p> <p><b>11c</b></p> <p><b>11d</b></p> <p><b>11e</b> ► 366,436</p> <p><b>12</b></p>	<b>Business Code</b>	22,880	5,664

**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 response to any question in this Part IX.

Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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 ..	4,000	4,000		
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 Benefits paid to or for members ..				
5 Compensation of current officers, directors, trustees, and key employees ..	40,800	40,800		
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 ..	181,905	92,925	88,980	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) ..	15,945	15,945		
9 Other employee benefits ..				
10 Payroll taxes ..	20,416	10,654	9,762	
11 Fees for services (non-employees):				
a Management ..				
b Legal ..				
c Accounting ..				
d Lobbying ..				
e Professional fundraising services. See Part IV, line 17 ..				
f Investment management fees ..				
g Other ..				
12 Advertising and promotion ..	102		102	
13 Office expenses ..	2,221	2,221		
14 Information technology ..				
15 Royalties ..				
16 Occupancy ..	16,414		16,414	
17 Travel ..	42,404	15,830	26,574	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ..				
19 Conferences, conventions, and meetings ..				
20 Interest ..				
21 Payments to affiliates ..				
22 Depreciation, depletion, and amortization ..	9,462		9,462	
23 Insurance ..	5,570		5,570	
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 Awards ..	4,510	4,510		
b Other Payroll Expense ..	4,193		4,193	
c Printing ..	1,270		1,270	
d Dept Officer Caps ..	917		917	
e All other expenses ..	1,384	762	622	
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>351,513</b>	<b>187,647</b>	<b>163,866</b>	
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
A S S E T S	1 Cash -- non-interest-bearing .....	206,478	1	236,038
	2 Savings and temporary cash investments .....	316,803	2	326,182
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....	-50	4	-62
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 420,376		
	b Less: accumulated depreciation .....	10b 81,222	348,616	10c 339,154
	11 Investments -- publicly traded securities .....		11	
	12 Investments -- other securities. See Part IV, line 11 .....		12	
	13 Investments -- program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....		15	
L I A B I L I T E S	16 Total assets. Add lines 1 through 15 (must equal line 34) .....	871,847	16	901,312
	17 Accounts payable and accrued expenses .....	49,220	17	62,562
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		25	
	26 Total liabilities. Add lines 17 through 25 .....	49,220	26	62,562
N F E T N D A S B S A E L T A S N O E R S	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets .....	17,943	27	19,169
	28 Temporarily restricted net assets .....	771,137	28	786,034
	29 Permanently restricted net assets .....	33,547	29	33,547
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> 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 .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
	33 Total net assets or fund balances .....	822,627	33	838,750
	34 Total liabilities and net assets/fund balances .....	871,847	34	901,312

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI 

1 Total revenue (must equal Part VIII, column (A), line 12) .....

2 Total expenses (must equal Part IX, column (A), line 25) .....

3 Revenue less expenses. Subtract line 2 from line 1 .....

4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).....

5 Other changes in net assets or fund balances (explain in Schedule O) .....

6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) .....

1	366,436
2	351,513
3	14,923
4	822,627
5	-1,225
6	838,750

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII 

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? .....

b Were the organization's financial statements audited by an independent accountant? .....

c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ..... N/A  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  
 Separate basis  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 the Single Audit Act and OMB Circular A-133? .....

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 ..... N/A

	Yes	No
2a		X
2b		X
2c		
3a		X
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****DEPARTMENT OF AK VFW OF THE US****Employer identification number****92-0017695****Part I 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 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 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.	
a Total number of conservation easements .....	
b Total acreage restricted by conservation easements .....	
c Number of conservation easements on a certified historic structure included in (a) .....	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
1b 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:
(I) Revenues included in Form 990, Part VIII, line 1 .....
(II) Assets included in Form 990, Part X .....
2 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:
a Revenues included in Form 990, Part VIII, line 1 .....
b Assets included in Form 990, Part X .....

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

Schedule D (Form 990) 2011

**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a  Public exhibition  
 b  Scholarly research  
 c  Preservation for future generations

d  Loan or exchange programs  
 e  Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV** Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V** Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► %

b Permanent endowment ► %

c Temporarily restricted endowment ► %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(I) unrelated organizations

(II) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Yes	No
3a(I)	
3a(II)	
3b	

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land					
b Buildings		357,021		18,308	338,713
c Leasehold improvements					
d Equipment		63,355		62,914	441
e Other					

Total. Add lines 1a through 1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ► 339,154

<b>Part VII Investments -- Other Securities.</b> See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

<b>Part VIII Investments -- Program Related.</b> 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 value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

<b>Part IX Other Assets.</b> See Form 990, Part X, line 15.		
(a) Description	(b) Book value	
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►		

<b>Part X Other Liabilities.</b> See Form 990, Part X, line 25.		
(a) Description of liability	(b) Book value	
(1) Federal income taxes .....		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
(11) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XII Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1 Total revenue (Form 990, Part VIII, column (A), line 12) . . . . .	1
2 Total expenses (Form 990, Part IX, column (A), line 25) . . . . .	2
3 Excess or (deficit) for the year. Subtract line 2 from line 1 . . . . .	3
4 Net unrealized gains (losses) on investments . . . . .	4
5 Donated services and use of facilities . . . . .	5
6 Investment expenses . . . . .	6
7 Prior period adjustments . . . . .	7
8 Other (Describe in Part XIV.) . . . . .	8
9 Total adjustments (net). Add lines 4 through 8 . . . . .	9
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 . . . . .	10

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1 Total revenue, gains, and other support per audited financial statements . . . . .	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains on investments . . . . .	2a
b Donated services and use of facilities . . . . .	2b
c Recoveries of prior year grants . . . . .	2c
d Other (Describe in Part XIV.) . . . . .	2d
e 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:	
a Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b Other (Describe in Part XIV.) . . . . .	4b
c Add lines 4a and 4b . . . . .	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	5

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1 Total expenses and losses per audited financial statements . . . . .	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities . . . . .	2a
b Prior year adjustments . . . . .	2b
c Other losses . . . . .	2c
d Other (Describe in Part XIV.) . . . . .	2d
e 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:	
a Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b Other (Describe in Part XIV.) . . . . .	4b
c Add lines 4a and 4b . . . . .	4c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . .	5

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.



**Part II** **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

REVENUE		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
1	Gross receipts .....				
2	Less: Charitable contributions .....				
3	Gross income (line 1 minus line 2) .....				
4	Cash prizes .....				
5	Noncash prizes .....				
6	Rent/facility costs .....				
7	Food and beverages .....				
8	Entertainment .....				
9	Other direct expenses .....				
10	Direct expense summary. Add lines 4 through 9 in column (d) .....				► ( )
11	Net income summary. Combine line 3, column (d), and line 10 .....				► ( )

**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		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) thru col. (c))
1	Gross revenue .....			70,072	70,072
2	Cash prizes .....			37,200	37,200
3	Noncash prizes .....				
4	Rent/facility costs .....				
5	Other direct expenses .....			27,208	27,208
6	Volunteer labor .....	Yes _____ % <input checked="" type="checkbox"/> No	Yes _____ % <input checked="" type="checkbox"/> No	Yes _____ % <input checked="" type="checkbox"/> No	( )
7	Direct expense summary. Add lines 2 through 5 in column (d) .....				64,408
8	Net gaming income summary. Combine line 1, column d, and line 7 .....				5,664

9 Enter the state(s) in which the organization operates gaming activities AK

a Is the organization licensed to operate gaming activities in each of these states? .....  Yes  No  
b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .....  Yes  No

b If "Yes," explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers? .....  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? .....  Yes  No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility .....

b An outside facility .....

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

13a	100.00	%
13b		%

Name ► See Attachment #3

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to 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 ► \$ 25,250

**Part IV 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).

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

**DEPARTMENT OF AK VFW OF THE US**

Employer identification number  
**92-0017695**

Form 990, Part VI, Line 11 - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Available upon request

Form 990, Part XI, Line 5 - Stale dated checks and PPA

## 990 BOOKS ARE IN CARE OF

### Attachment 1: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection	For calendar year 2011 or tax period beginning	07-01	, and ending	06-30-2012.
Name of Organization				Employer Identification Number
DEPARTMENT OF AK VFW OF THE US				92-0017695
<b>Part VI - Line 20</b>				

Individual Name ..... John Minnick

or

Business Name:

Street Address ..... 500 E Park Avenue

U.S. Address:

Zip code 99654

City Wasilla

State AK

or

Foreign Address

City ..... \_\_\_\_\_

Province or State ..... \_\_\_\_\_

Country ..... \_\_\_\_\_

Postal code ..... \_\_\_\_\_

Phone Number ..... (907) 373-7600

Fax Number ..... \_\_\_\_\_

**990 PAGE 10, OTHER EXPENSES****Attachment 2: Form 990 Page 10, Line 24 - Other Expenses**

Open to Public Inspection	For calendar year 2011 or tax period beginning	07-01-2011, and ending	06-30-2012.
Name of Organization <b>DEPARTMENT OF AK VFW OF THE US</b>		Employer Identification Number <b>92-0017695</b>	
Other Expenses	(A) Total	(B) Program Services	(C) Management and General
Tax Return Preparation	622		622
Postage	343	343	
Miscellaneous	310	310	
Needy Vets	109	109	
<b>Total:</b>	<b>1,384</b>	<b>762</b>	<b>622</b>

## 990 GAMING/SPECIAL EVENTS BOOKS AND RECORDS

### Attachment 3: Sch G Page 3, Part III, Line 14

Open to Public	For calendar year 2011 or tax period beginning	07-01-2011, and ending	06-30-2012.
Inspection			
Name of Organization	Employer Identification Number		
DEPARTMENT OF AK VFW OF THE US	92-0017695		

#### Part III - Line 14

Individual Name ..... John Minnick

or

Business Name:

Street Address ..... 500 E Parks Avenue

U.S. Address:

Zip code 99654

or

City Wasilla

State AK

Foreign Address

City .....

Province or State .....

Country .....

Postal code .....

## 2011 DETAIL STATEMENTS

DEPARTMENT OF AK VFW OF THE US  
92-0017695

Page 1

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### STATEMENT #1 - Investment income total rev (990 EO PG 9 Line 3)

General Account.....	12,021
Gaming Account.....	15
<b>TOTAL CARRIED TO 990 EO PG 9 Line 3.....</b>	<b>12,036</b>

---

### STATEMENT #2 - Other changes in net assets (990 EO PG 12 Line 5)

Stale Dated Check - Gaming Account.....	-25
Prior Period Adjustments.....	-1,200
<b>TOTAL CARRIED TO 990 EO PG 12 Line 5.....</b>	<b>-1,225</b>

---

### STATEMENT #3 - Gross revenue other gaming (SCH G, PG 2 Line 1)

Calendar Raffle.....	41,702
Department Raffle.....	28,370
<b>TOTAL CARRIED TO SCH G, PG 2 Line 1.....</b>	<b>70,072</b>

---

### STATEMENT #4 - Cash prizes other gaming (SCH G, PG 2 Line 2)

Calendar Prizes.....	25,250
Raffle Prizes.....	11,950
<b>TOTAL CARRIED TO SCH G, PG 2 Line 2.....</b>	<b>37,200</b>

---

### STATEMENT #5 - Other direct exp.other gaming (SCH G, PG 2 Line 5)

Calendar Costs.....	53
Gaming Permit.....	50
Bank Fees.....	100
Gaming Fee.....	352
Raffle Tickets.....	275
Supplies.....	189
Tax Preparation.....	127
Use of Proceeds.....	25,500
Returned Checks.....	562

**TOTAL CARRIED TO SCH G, PG 2 Line 5.....** **27,208**

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# Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2011

Attachment  
Sequence No. 179Department of the Treasury  
Internal Revenue Service (99)

▶ See separate Instructions.

▶ Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

DEPARTMENT OF AK VFW OF THE USFOR FORM 990

92-0017695

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions) . . . . .	1		
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2		
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3		
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	4		
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	5 500,000		
<b>6 (a) Description of property</b>	<b>(b) Cost (busn. use only)</b>	<b>(c) Elected cost</b>	
7 Listed property. Enter the amount from line 29 . . . . .	7		
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. . . . .	8		
9 Tentative deduction Enter the smaller of line 5 or line 8 . . . . .	9		
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 . . . . .	10		
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	11 500,000		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	12		
13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 11 . . . . . ► 13			

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . .	14
15 Property subject to section 168(f)(1) election . . . . .	15
16 Other depreciation (including ACRS) . . . . .	16

**Part III MACRS Depreciation (Do not include listed property) (See instructions.)****Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2011 . . . . .	17	9,462
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . . . ► X		

**Section B -- Assets Placed In Service During 2011 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C -- Assets Placed In Service During 2011 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21 Listed property. Enter amount from line 28 . . . . .	21
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions . . . . .	22 9,462
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23

For Paperwork Reduction Act Notice, see separate Instructions.