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DLN: 93493014007033

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

A Fo	r the 2	2011 ca	lendar year, or tax year beginning 09-	01-2011 and ending 08-31-20)12		Inspection
_		pplicable	C Name of organization VETERANS OF FOREIGN WARS OF THE UNIT	TED STATES			entification number
_	ress cha ne char	_	Doing Business As			44-047429 E Telephone n	
	ıal retur		November and street /or D.O. have formal as a	-	-	(816)756-	3390
	mınated		Number and street (or P O box if mail is no 406 W 34TH ST	ot delivered to street address) Room/	suite	G Gross receipts	\$ \$ 167,563,283
_	ended r		City or town, state or country, and ZIP + 4 KANSAS CITY, MO 64111				
App	lication	pending					
			F Name and address of principal ROBERT B GREENE	officer		this a group retur liates?	n for □ Yes ▼ No
			406 W 34TH ST KANSAS CITY,MO 64111				
					1 ' '	all affiliates includ 'No." attach a list	ded?
		pt status	, 551(5)(5), 551(5)(15), (15)	no) 4947(a)(1) or 527	1	oup exemption ni	·
			/W V FW O RG		<u> </u>		
			Corporation Trust Association Ot	ther 🟲	L Year of	formation 1899	M State of legal domicile
Pa	rt I		mary escribe the organization's mission or n				
ACTIVITIES & GOVEINANCE	2 C 3 N 4 N	Check th Number o	nis box if the organization disconting members of the governing boof independent voting members of the mber of individuals employed in calend	nued its operations or disposed dy (Part VI, line 1a) governing body (Part VI, line 1	b)	3	65 59 214
4			mber of volunteers (estimate if necess			6	3,000
	7a ⊺	Total unr	related business revenue from Part VI	II, column (C), line 12		7a	3,935,756
	ЬΛ	Net unre	lated business taxable income from Fo	orm 990-T, line 34		7b	C
	8	Control	hutions and grants (Part VIII June 1h)			rior Year	Current Year 69,752,380
횰	9		butions and grants (Part VIII, line 1h) im service revenue (Part VIII, line 2g)		: -	69,372,284 14,819,367	14,628,340
Revenue	10	_	tment income (Part VIII, column (A), l			3,966,241	3,648,895
ď	11		revenue (Part VIII, column (A), lines			5,168,286	5,160,241
	12		revenue—add lines 8 through 11 (must		ine	93,326,178	93,189,856
	13	Grants	s and similar amounts paid (Part IX, co	lumn (A), lines 1-3)		10,470,982	9,795,899
	14		ts paid to or for members (Part IX, col		_	0	0
8	15	5-10)	es, other compensation, employee ben)	ents (Part 1X, Column (A), lines	·	14,571,132	14,793,285
Expenses	16a		sional fundraising fees (Part IX, colum			2,298,001	2,353,646
ភ	ь 17		ndraising expenses (Part IX, column (D), line 2 expenses (Part IX, column (A), lines 1			63,543,182	64,611,951
	18		expenses Add lines 13–17 (must equ			90,883,297	91,554,781
	19		ue less expenses Subtract line 18 fro			2,442,881	1,635,075
Net Assets or Fund Balances					Beginn	ing of Current Year	End of Year
sset Jakai	20	Totala	assets (Part X, line 16)			200,215,015	202,307,340
et A and E	21	Total I	liabilities (Part X, line 26)			157,759,446	159,393,500
	22		sets or fund balances Subtract line 2	1 from line 20		42,455,569	42,913,840
	t II		ature Block erjury, I declare that I have examined this	return including accompanying	echedules and	l statements and t	to the best of my
	edge a		f, it is true, correct, and complete. Declar				
		****				2013-01-09	
Sign Here			ature of officer			Date	
	•		ERT B GREENE QUARTERMASTER GENERAL or print name and title				
Paid		Preparer signature		Date	Check if self-employed	Preparer's taxpa (see instruction: P00943320	ayer identification number s)
	rer's	Firm's na					
Prepa			ame (or yours FRANK & COMPANY PC			EIN > 54-1156	733
Prepa Use (ıf self-en	ame (or yours inployed), and ZIP + 4 FRANK & COMPANY PC 1360 BEVERLY ROAD SUITE	300		EIN ▶ 54-1156	

	III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
PRES AND GOV PAT	Briefly describe the organization's mission RGANIZATION'S PURPOSE IS TO PROVIDE FRATERNAL, PATRIOTIC, HISTORICAL, AND EDUCATIONAL SERVICES, TO RVE AND STRENGTHEN COMRADESHIP AMONG MEMBERS, TO ASSIST WORTHY VETERANS, TO PERPETUATE THE MEMOR' ISTORY OF OUR DEAD, AND TO ASSIST THEIR WIDOWS AND ORPHANS, TO MAINTAIN TRUE ALLEGIANCE TO THE RNMENT OF THE UNITED STATES OF AMERICA, AND FIDELITY TO ITS CONSTITUTION AND LAWS, TO FOSTER TRUE OTISM, TO MAINTAIN AND EXTEND THE INSTITUTIONS OF AMERICAN FREEDOM, AND TO PRESERVE AND DEFEND THE ED STATES FROM ALL OF HER ENEMIES, WHOMSOEVER
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Old the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O 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 \$ 18,614,902 including grants of \$ 2,416,937) (Revenue \$) VETERANS SERVICE ACTIVITIES - THE VFW MISSION INCLUDES THE MANDATE TO PRESERVE AND STRENGTHEN COMRADESHIP AMONG VETERANS AND TO PROVID ASSISTANCE TO THEM, THEIR WIDOWS AND ORPHANS TO MEET THIS OBLIGATION, THE VFW DELIVERS A BROAD RANGE OF PROGRAMS AND SERVICES TO VETERANS THROUGH A NATIONAL ORGANIZATION STRUCTURE THAT EXTENDS TO POSTS IN COMMUNITIES THROUGHOUT THE COUNTRY AT THE STATE LEVEL, TO DEPARTMENT SERVICE OFFICER PLAYS A KEY ROLE IN ASSISTING VETERANS IN DEALING WITH THE DEPARTMENT OF VETERANS AFFAIRS AND OTHER AGENCIES THESE OFFICERS ARE FORMALLY TRAINED AND ACCREDITED TO REPRESENT BOTH MEMBER AND NON-MEMBER VETERANS AND THEIR DEPENDENTS OR SURVIVORS IN APPLYING FOR AND OBTAINING DEPARTMENT OF VETERANS AFFAIRS (VA) BENEFITS THE VFW NATIONAL VETERANS SERVICE STAFF PROVIDES ADDITIONAL SPECIALIZED EXPERTISE SUCH AS REPRESENTATION AT THE VA BOARD OF VETERANS APPEALS AND AT THE BENEFITS DELIVERY AT DISCHARGE POINTS FOR SOON TO BE DISCHARGED ACTIVE DUTY MILITARY PERSONNEL THIS STRUCTURE ENSURES THAT NO VETERAN, DEPENDENT OR SURVIVOR NEEDS TO DEAL WITH THE AGENCIES ADMINISTERING VETERANS PROGRAMS WITHOUT EXPERT REPRESENTATION IN ADDITION, THEY ADVOCATE DIRECTLY WITH GOVERNMENTAL AGENCIES TO RESOLVE ISSUES IMPACTING VETERANS FOR THE FISCAL YEAR ENDED AUGUST 31, 2012, SERVICE OFFICERS AND VFW NATIONAL STAFF ASSISTED 120,973 CLAIMANTS RECOVER ALMOST \$3 BILLION IN BENEFITS IN ADDITION, THE VFW PROVIDED TRAINING TO 349 SERVICE OFFICERS AT BASIC, ADVANCED, AND PROFICIENCY TRAINING CONFERENCES
4b	(Code) (Expenses \$ 15,737,009 including grants of \$ 256,313) (Revenue \$) COMMUNITY SERVICE AND PATRIOTIC ACTIVITIES - COMMUNITY SERVICE IS A MAJOR PRIORITY OF THE VFW THE VFW'S MISSION INCLUDES MAINTAINING TRU ALLEGANCE TO THE GOVERNMENT OF THE UNITED STATES OF AMERICA AND FIDELITY TO ITS CONSTITUTION AND LAWS, FOSTERING TRUE PATRIOTISM AND LOOF COUNTRY, AND MAINTAINING AND EXTENDING THE INSTITUTIONS OF AMERICAN FREEDOM TO FULFILL THESE OBJECTIVES, THE VFW HAS A COMPREHENSIVE SET OF EDUCATIONAL AND INFORMATIONAL PROGRAMS, AND ACTIVITIES THAT REACH OUT TO EVERY AMERICAN VIRTUALLY EVERY DAY OF THE YES THE MAJOR ELEMENTS OF VFW COMMUNITY SERVICE INCLUDE COMMUNITY ACTIVITIES, CITIZENSHIP EDUCATION, SAFETY PROGRAMS, AND YOUTH ACTIVITIES COMMUNITY ACTIVITIES INCLUDE ASSISTANCE IN CONDUCTING BLOOD DRIVES, RECYCLING PROGRAMS, AND NEIGHBORHOOD AND HIGHWAY BEAUTIFICATION PROJECTS, COOPERATING WITH OTHER ORGANIZATIONS THROUGH ASSISTANCE IN CONDUCTING PROJECTS, COOPERATING WITH OTHER ORGANIZATIONS THROUGH ASSISTANCE IN CONDUCTING FAMILES IN TIMES OF PERSONAL TRAGEDY OR ILLNESS, AND ASSISTANCE TO CHURCHES AND SCHOOLS THROUGH VOLUNTEERING AND SPEAKER PROGRAMS CITIZENSHIP EDUCATION, MATERIALS, AND ACTIVITIES ARE GEARED TO REMIND, EDUCATE, AND INFORM CITIZENS OF THEIR COUNTRY'S TRADITIONS, FREEDOMS, AND THE PLAG, PROPER FLAG DISPLAY, THE FLAG HISTORY AND THE FLAG CODE AS WELL AS PERIODIC DISTRIBUTION OF INFORMATION HONORING THE FLAG, PROPER FLAG DISPLAY, THE FLAG HISTORY AND THE FLAG CODE AS WELL AS PERIODIC DISTRIBUTION OF FREE FLAGS SUPPORT OF CITIZENSHIP EDUCATION IN SCHOOLS THROUGH DISTRIBUTION OF PATRIOTIC HOLIDAYS THROUGH DISTRIBUTION OF PATRIOTIC HOLIDAYS SUCH AS MEMORIAL DAY, V-J DAY VETERANS DAY, AND D-DAY, CELEBRATION OF PATRIOTIC HOLIDAYS THROUGH DISTRIBUTION OF PATRIOTIC HOLIDAYS THROUGH PATRIOTIC HOLIDAYS SUCH AS MEMORIAL DAY, V-J DAY VETERANS DAY, AND D-DAY, CELEBRATION OF PATRIOTIC HOLIDAYS THROUGH PATRICIPATION IN PARADES, PRESENTATIONS AND ASSEMBLES, DISTRIBUTION OF PATRIOTIC HOLIDAYS AND CAMPAINES, RECREA
4c	(Code) (Expenses \$ 11,215,456 Including grants of \$ 7,122,649) (Revenue \$) DEPARTMENT AND LOCAL POST ACTIVITIES - DEPARTMENT AND LOCAL POST ACTIVITIES ARE VITAL COMPONENTS OF THE VETERAN'S SERVICE, COMMUNITY SERVICE, AND MILITARY ASSISTANCE PROGRAMS SUPPORT FROM THE VFW NATIONAL HEADQUARTERS IS CRITICAL TO THE ACHIEVEMENT OF THE VFW MISSION THE VFW NATIONAL HEADQUARTERS PROVIDED \$7,122,649 IN GRANTS TO HELP SUPPORT VETERANS SERVICE PROGRAMS AND COMMUNITY SERVICE PROGRAMS AT THE VFW STATE LEVEL THESE GRANTS ARE USED TO PROVIDE EQUIPMENT, PERSONNEL AND RESOURCES NEEDED AT THE STATE LEVEL TO CARRY OUT THE VETERANS SERVICE ACTIVITIES DESCRIBED ABOVE THESE FUNDS ARE ALSO USED TO PROVIDE LEADERSHIP, ADMINISTRATION, INFORMATION AND INCENTIVES MOBILIZE VOLUNTEER EFFORTS IN LOCAL COMMUNITIES IN SUPPORT OF PATRIOTIC ACTIVITIES, COMMUNITY PROJECTS, YOUTH ACTIVITIES, AND EFFORTS TO SUPPORT ACTIVE DUTY MILITARY PERSONNEL, GUARD AND RESERVES IN ADDITION, FUNDS ARE PROVIDED TO ASSIST WITH NATURAL DISASTERS AFFECTING MEMBERS AND THEIR FAMILIES AND TO ASSIST NEEDY VETERANS AND MILITARY PERSONNEL AND THEIR FAMILIES
	(Code) (Expenses \$ 9,618,534 including grants of \$) (Revenue \$) MEMBERSHIP SERVICES - VFW PROVIDES A MAGAZINE AND EMBLEMATIC SUPPLIES TO MEMBERS AND VETERANS TO PROMOTE HISTORICAL EDUCATION AND COMMEMORATION AND PROMOTION OF PATRIOTIC SUPPORT AND ACTIVITIES THE VFW MAGAZINE PROVIDES MEMBERS AND THE GENERAL PUBLIC INFORMATIO CONCERNING LEGISLATIVE AND ADMINISTRATIVE ISSUES RELATING TO VETERANS, HEALTH PROBLEMS CONFRONTING VETERANS, HISTORICAL AND COMMEMORATIVE EVENTS AND ACTIVITIES, SUPPORT PROVIDED BY MEMBERS IN SUPPORT OF VFW SPONSORED PROGRAMS IN THEIR LOCAL COMMUNITIES AND OTHER INFORMATION TO ENCOURAGE MEMBERS TO ACT
	(Code) (Expenses \$ 2,621,669 including grants of \$) (Revenue \$) NATIONAL LEGISLATIVE SERVICE ACTIVITIES - LEGISLATIVE SERVICES SERVE THE MEMBERSHIP THROUGH PROTECTION AND ENHANCEMENT OF VETERAN'S BENEFITS AT FEDERAL, STATE AND LOCAL LEVELS THIS SERVICE ENSURES THE VIEWS OF VETERANS ARE PRESENTED TO LEGISLATORS AND PROVIDES RECOMMENDATIONS CONCERNING PROPOSED LEGISLATION THE MEMBERSHIP IS KEPT INFORMED OF THESE ACTIVITIES THROUGH THE VFW MAGAZINE AND TH WASHINGTON ACTION REPORTER VFW REGULARLY APPEALS TO LAWMAKERS AND DEFENSE LEADERSHIP TO ENSURE THE HIGHEST LEVEL OF TRAINING, EQUIPMENT AND COMPENSATION FOR AMERICA'S SOLDIERS, SAILORS, AIRMEN, MARINES, AND COAST GUARD PERSONNEL
	(Code) (Expenses \$ 541,953 including grants of \$) (Revenue \$) EDUCATIONAL AND INFORMATIVE ACTIVITIES
4d	Other program services (Describe in Schedule O) (Expenses \$ 12,782,156 including grants of \$) (Revenue \$)
4e	Total program service expenses►\$ 58,349,523

Part IV	Check	list 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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
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		No
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? <i>If</i> "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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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		No
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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
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		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
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 U S? If "Yes," complete Schedule F, Part II and IV	15	Yes	
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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	17	Yes	
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizat the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	ons in 21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United Stone Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	ates 22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24c complete Schedule K. If "No," go to line 25			No
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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction a disqualified person during the year? If "Yes," complete Schedule L, Part I	n with 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a proyear, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2 "Yes," complete Schedule L, Part I			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employed disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	ee, or 26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, subst contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	antial 27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Poinstructions for applicable filing thresholds, conditions, and exceptions)	art IV		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV) was 28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	ete 32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	s % 33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III and V, line 1	, IV, 34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)	(13)? 35a	Yes	
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	he 35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable relationganization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	ed 36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organizat and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Note. All Form 990 filers are required to complete Schedule O	38	Yes	
			orm 99 0	0(2011)

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
.a	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 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a.	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	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		105	
а	Did the organization have unrelated business gross income of \$1,000 or more during the			
.	year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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 or securities	4a		No
L	account)?			NO
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			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		.,,0
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
-	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	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		No
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70		
U	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
f	contract?	/e 7f		No
		/ f		1/1/0
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		
	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.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	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)			
	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			
2	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? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	,		
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b			
_	the states in which the organization is licensed to issue qualified health plans Enter the aggregate amount of reserves on hand			
·	13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2011) Page **6 Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Part VI O. See instructions. Check if Schedule O contains a response to any question in this Part VI

_Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
14	year			
ь	Enter the number of voting members included in line 1a, above, who are			
	ındependent			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
<u></u>	evenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	Yes	110
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100	162	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
12	In Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			1
	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
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			
	organization's exempt status with respect to such arrangements?	16b	Yes	
	ection C. Disclosure		NA =	
17	List the States with which a copy of this Form 990 is required to be filed ►AK, AZ, AR, CO, CT, FL, GA, IL, KY MN, MS, NH, NJ, NY, NC, ND, OH, G UT, WA, WV			

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - ☐ O wn website ☐ A nother's website ☑ U pon request
- 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 See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ROBERT B GREENE 406 W 34TH ST KANSAS CITY, MO 64111 (816) 756-3390

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

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, and **current** key employees 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, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(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-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

(A) Name and Title		(B) Average hours per week (describe hours hours								(D) portable pensation om the zation (W-	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and related	
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	
See A	ddıtıonal Data Table													
												_		
												\dashv		
												+		
												1		
1b	Sub-Total							•						
c	Total from continuation sheets Total (add lines 1b and 1c) .	to Part VII, Sec				•		•		2,044,786		0		339,388
2	Total number of individuals (incl	udıng but not lın	nited to	thos			above) who	o receive	ed more tha	ın			
	\$100,000 of reportable compen	sation from the	organız	ationI	► 13									
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch									st compens	ated employee	3	Yes	No No
4	For any individual listed on line in organization and related organization and related organization.											4		
5	Did any person listed on line 1a services rendered to the organiz										or individual for	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper n the organizatio												
	Nar	(A) ne and business ad	dress							Desc	(B) ription of services		(C Comper	
242 V NEW	COMMUNICATIONS INC V 27TH STREET 1B YORK, NY 10001									MAGAZINE B	ROKER		1	,521,619
24 MI	KMILL MARKETING SERVICES ILL BROOK RD DN, NH 03086									FUNDRAISIN	G SERVICES		1	,463,781
5342 TOPE	HWEST CAGING CORPORATION NW 25TH STREET KA, KS 66618									CAGING SER	VICES		1	,307,524
545 V MESA	COMMUNICATIONS CORP V JUANITA AVE , AZ 85210		_	_		_			_	TELEMARKE	ΓING SERVICES		1	,231,687
	MERCE REGISTER INC DX 190									DATA PROCE	ESSING SERVICES			776,503
	AND PARK, NJ 07432													

Part V		Statement o	r kevenue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
维선	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership du	es					
ું.	c	Fundraising eve	ents 1c					
€ 등	d	Related organiz	ations 1d	1,056,915				
% ≣	e	Government grants	s (contributions) 1e					
음종	l f	All other contribution	ons, gifts, grants, and 1f	68,695,465				
重量		sımılar amounts no	ot included above					
真る	g		butions included in					
52	h	lines 1a-1f \$	s 1a-1f	▶	69,752,380			
O m	<u>"</u>	Total: Add lilles			,			
e E	_			Business Code				
цељ	2a	MEMBERSHIP DUES	<u> </u>	900099	7,846,998	7,846,998		
22	b	MAGAZINE ADVERT	ISING	541800	3,933,868		3,933,868	
e S	С	MEMBER INSURAN	CE PROGR	524298	2,321,183			2,321,183
	d	RENTAL INCOME F	ROM AFF	531390	227,889			227,889
ج ج	e	CONVENTION REGI	ISTRATIO	900099	215,801			215,801
Program Serwce Revenue	f	All other progra	ım service revenue		82,601			82,601
Š	_	Total Add Im-	- 7a-7f		14 520 240			
	g 3		s 2a-2f	+	14,628,340			
			ome (including dividen	. F	2,294,979			2,294,979
	4		ar amounts) tment of tax-exempt bond	· · ·	2,231,373			2,23 1,373
	5		· · · · · · ·	- -	1,920,980			1,920,980
		Royalties : :	(ı) Real	(II) Personal	, ,			, ,
	6a	Gross rents	789,910	33,566				
	ь	Less rental	476,734	28,178				
	_	expenses Rental income	313,176	5,388				
	C	or (loss)	·	·				
	d	Net rental inco	me or (loss)		318,564		5,388	313,176
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of	71,747,141	2,470				
		assets other than inventory						
	ь	Less cost or	70,395,695	0				
		other basis and sales expenses						
	c	Gain or (loss)	1,351,446	2,470				
	d	Net gain or (los	s)	▶	1,353,916			1,353,916
Other Revenue	8a	Gross income fi events (not incl \$						
क ≳			reported on line 1c)					
ď		See Part IV, lin	e 18 a					
<u> </u>	Ь	less directer	penses b					
₹	c		loss) from fundraising	events 🟲				
_	9a		rom gaming activities					
		See Part IV, lin						
			а					
	ь		penses b					
	c		loss) from gaming acti	vities 🟲				
	10a	Gross sales of returns and allo		6,391,555				
	ь	Less costofa	oods sold b	3,472,820				
	c	=	ا loss) from sales of ۱nve(2,918,735	2,916,555	2,180	
		Miscellaneous		Business Code				
	11a	SUBSCRIPTIO	N REVENUE	511120	7,642			7,642
	ь	INCOME(LOSS		900001	-5,680		-5,680	
	_ c	<u> </u>	<u>·</u>					
	d	All other reven	ue					
	e	Total. Add lines						
	12		See Instructions .	· · ▶	1,962			
	l				93,189,856	10,763,553	3,935,756	8,738,167

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)

	neck if Schedule O contains a response to any question in this Part IX	<u> </u>	(B)	l	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	8,482,680	8,482,680		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,229,203	1,229,203		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	84,016	84,016		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,552,176	1,262,596	289,580	
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	8,693,266	7,512,182	979,946	201,138
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,807,607	1,558,347	201,675	47,585
9	Other employee benefits	1,938,590	1,607,977	288,505	42,108
10	Payroll taxes	801,646	689,348	95,598	16,700
11	Fees for services (non-employees)				
а	Management				
b	Legal	54,730		54,730	
С	Accounting	52,921		52,921	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	2,353,646			2,353,646
f	Investment management fees	218,155		218,155	
g	Other	3,670,557	1,132,511	304,751	2,233,295
12	Advertising and promotion	481,145	444,062	15,969	21,114
13	Office expenses	1,658,197	1,074,205	536,439	47,553
14	Information technology				
15	Royalties				
16	Occupancy	668,975	615,592	52,985	398
17	Travel	1,465,481	1,307,929	151,871	5,681
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,443,419	2,422,482	20,923	14
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,231,948	1,068,796	162,896	256
23	Insurance	205,341	188,403	16,812	126
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	DUES NOTICES & DIRECT M	45,437,879	20,675,286	756,256	24,006,337
b	VFW MAGAZINE & OTHER PU	5,594,495	5,594,495		
С	OTHER PROGRAMMATIC ACTI	1,111,494	1,111,494		
d	TEMPORARY HELP	155,955	129,755	13,978	12,222
e					
f	All other expenses	161,259	158,164	562	2,533
25	Total functional expenses. Add lines 1 through 24f	91,554,781	58,349,523	4,214,552	28,990,706
26	Joint costs. Check here ► ✓ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				<u> </u>
	combined educational campaign and fundraising solicitation	45,578,929	20,002,635		25,151,343 rm 990 (2011)

Pa	rt X	Balance Sheet						
						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				2,700	1	2,700
	2	Savings and temporary cash investments	18,569,195	2	9,044,226			
	3	Pledges and grants receivable, net	1,883,244	3	4,175,665			
	4	Accounts receivable, net				1,881,165	4	1,534,899
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	/ er	nployees, and			
		Schedule L					5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		n 4	958(f)(1)) and			
70		Schedule L					6	
Assets	7	Notes and loans receivable, net					7	
8	8	Inventories for sale or use				1,612,143	8	1,680,086
⋖	9	Prepaid expenses and deferred charges				2,117,156	9	2,740,087
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a		30,030,568			
	b	Less accumulated depreciation	10b		22,636,366	7,456,267	10 c	7,394,202
	11	Investments—publicly traded securities				161,034,173	11	169,622,602
	12	Investments—other securities See Part IV, line 11				5,262,599	12	5,690,074
	13	Investments—program-related See Part IV, line 11		13				
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11		396,373	15	422,799		
	16	Total assets. Add lines 1 through 15 (must equal line 34)				200,215,015	16	202,307,340
	17	Accounts payable and accrued expenses .				6,272,174	17	7,354,013
	18	Grants payable		798,098	18	849,347		
	19	Deferred revenue	31,505,402	19	32,047,177			
	20	Tax-exempt bond liabilities			20			
- 46	21	Escrow or custodial account liability Complete Part IV of Schedul	_		21			
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
졅		persons Complete Part II of Schedule L					22	
Ξ	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 relate and other liabilities not included on lines 17-24) Complete Par				119,183,772	25	110 142 063
	26	D Total liabilities Add lines 17 through 25				157,759,446	25 26	119,142,963 159,393,500
	26	Total liabilities. Add lines 17 through 25	.1.4.1		- 27	157,759,440	26	139,393,300
Balances		Organizations that follow SFAS 117, check here ▶ → and compathrough 29, and lines 33 and 34.	olete i	ıın∈	s 2/			
<u> </u>	27	Unrestricted net assets		38,142,250		38,525,753		
ä	28	Temporarily restricted net assets		4,313,319	28	4,388,087		
Fund	29	Permanently restricted net assets		29				
æ		Organizations that do not follow SFAS 117, check here ► ar	ete					
ŏ		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
4	32	Retained earnings, endowment, accumulated income, or other fu	ınds			, <u>.</u>	32	
Net	33	Total net assets or fund balances		42,455,569	33	42,913,840		
_	34	Total liabilities and net assets/fund balances				200,215,015	34	202,307,340

Pal	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)	1		93.1	189,85
2	Total expenses (must equal Part IX, column (A), line 25)	2			554,78
3	Revenue less expenses Subtract line 2 from line 1	3		1,6	35,07
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		42,4	155,56
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-1,1	76,80
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		42,9	13,84
Par	TXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			┌	
		г		Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Both consolidated and separated basis	sued			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

Additional Data

Software ID: Software Version:

EIN: 44-0474290

Name: VETERANS OF FOREIGN WARS OF THE UNITED STATES

Form 990, Special Condition Description:

Special Condition Description

orm 990, Part III - 4 Program Service Accomplishments (See the Instructions)											
4d. Other program services											
(Code) (Expenses \$	9,618,534 including grants of \$) (Revenue \$)							
PROMOTE HISTORI VFW MAGAZINE PRO ADMINISTRATIVE I COMMEMORATIVE	CAL EDUCATION AND CO OVIDES MEMBERS AND T SSUES RELATING TO VE EVENTS AND ACTIVITIE	MAGAZINE AND EMBLEMATIC SUPPLI DMMEMORATION AND PROMOTION OF HE GENERAL PUBLIC INFORMATION C TERANS, HEALTH PROBLEMS CONFROI S, SUPPORT PROVIDED BY MEMBERS I R INFORMATION TO ENCOURAGE MEM	F PATRIOTIC SUPPORT AND ACT ONCERNING LEGISLATIVE AND NTING VETERANS, HISTORICAL A N SUPPORT OF VFW SPONSORED	IVITIES THE							
AND ENHANCEMEN' VETERANS ARE PRE THE MEMBERSHIP I REPORTER VFW RE	T OF VETERAN'S BENEFI' SENTED TO LEGISLATOR S KEPT INFORMED OF TH GULARLY APPEALS TO LA	2,621,669 including grants of \$ IES - LEGISLATIVE SERVICES SERVE T TS AT FEDERAL, STATE AND LOCAL LE RS AND PROVIDES RECOMMENDATION IESE ACTIVITIES THROUGH THE VFW I WMAKERS AND DEFENSE LEADERSHIP ON FOR AMERICA'S SOLDIERS, SAILOR	VELS THIS SERVICE ENSURES T NS CONCERNING PROPOSED LEG MAGAZINE AND THE WASHINGTO P TO ENSURE THE HIGHEST LEVE	HE VIEWS OF ISLATION ON ACTION L OF							

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program	n services				
(Code) (Expenses \$	541,953	ıncludıng grants of \$) (Revenue \$)
EDUCATIONAL A	ND INFORMATIVE ACTIVITI	ES			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)												
(A) Name and Title	(B) Average hours		tion that	(che		all 		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
RICHARD L DENOYER COMMANDER-IN-CHIEF	40 00	Х		х				168,160	0	8,857		
JOHN E HAMILTON SENIOR VICE COMMANDER-IN-CHIEF	40 00	Х		×				145,121	0	0		
WILLIAM A THIEN JUNIOR VICE COMMANDER-IN-CHIEF	40 00	Х		×				45,149	0	1,592		
JOHN W STROUD JUNIOR VICE COMMANDER-IN-CHIEF	40 00	Х		×				1,081	0	0		
LAWRENCE M MAHER QUARTERMASTER GENERAL	40 00	Х		х				189,569	0	27,967		
ALLEN F KENT ADJUTANT GENERAL	40 00	Х		х				190,777	0	31,482		
ROBERT B GREENE QUARTERMASTER GENERAL	40 00	Х		х				137,749	0	68,362		
REV JOHN J HOLLAND CHAPLAIN	1 00	Х		×				1,509	0	0		
REV WILLIAM J BLEILER CHAPLAIN	1 00	Х		×				890	0	0		
MATTHEW MIHELCIC JUDGE ADVOCATE GENERAL	1 00	Х		×				792	0	0		
DAVID B NORRIS JUDGE ADVOCATE GENERAL	1 00	Х		х				6,181	0	0		
CURTIS O BOHLMAN MD SURGEON GENERAL	1 00	Х		×				2,677	0	0		
JAMES R TUORILA SURGEON GENERAL	1 00	Х		×				919	0	0		
WALTER GANSENBERG CHIEF OF STAFF	1 00	Х		x				1,261	0	0		
WILLIAM R KIRSOP CHIEF OF STAFF	1 00	Х		х				599	0	0		
JOHN A BIEDRZYCKI JR INSPECTOR GENERAL	1 00	Х		x				1,523	0	0		
CARL J KAELIN INSPECTOR GENERAL	1 00	Х		х				1,455	0	0		
VITO S DEMARCO NATIONAL COUNCIL OF ADMIN	1 00	Х						6,669	0	0		
THOMAS R LUSSIER NATIONAL COUNCIL OF ADMIN	1 00	Х						2,075	0	0		
CHARLIE W SMITH NATIONAL COUNCIL OF ADMIN	1 00	Х						480	0	0		
OTTO A GOLLON NATIONAL COUNCIL OF ADMIN	1 00	Х						1,129	0	0		
HAROLD J ROESCH NATIONAL COUNCIL OF ADMIN	1 00	Х						3,866	0	0		
RICHARD M FAULK NATIONAL COUNCIL OF ADMIN	1 00	Х						2,505	0	0		
DEAN E SMITH NATIONAL COUNCIL OF ADMIN	1 00	Х						7,913	0	0		
JOHN H SCOTT NATIONAL COUNCIL OF ADMIN	1 00	Х						909	0	0		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours		(tion that a			Ш		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
ROBERT A CLARK NATIONAL COUNCIL OF ADMIN	1 00	х						5,054	0	0	
FRANCIS M FOGNER NATIONAL COUNCIL OF ADMIN	1 00	Х						1,667	0	0	
GARY K MATHISEN NATIONAL COUNCIL OF ADMIN	1 00	Х						5,148	0	0	
ALLEN W KOCHENDERFER NATIONAL COUNCIL OF ADMIN	1 00	Х						599	0	0	
GEORGE C BERTHIAUME NATIONAL COUNCIL OF ADMIN	1 00	Х						5,875	0	0	
RONALD J LATTIN NATIONAL COUNCIL OF ADMIN	1 00	Х						1,699	0	0	
GEORGE F BARLETT NATIONAL COUNCIL OF ADMIN	1 00	Х						4,891	0	0	
RAYMOND K THOMAS NATIONAL COUNCIL OF ADMIN	1 00	Х						2,894	0	0	
STANLEY W BORUSIEWICZ JR NATIONAL COUNCIL OF ADMIN	1 00	Х						4,212	0	0	
H MERLE JACKSON NATIONAL COUNCIL OF ADMIN	1 00	Х						4,233	0	0	
WAYNE W ALDRIDGE NATIONAL COUNCIL OF ADMIN	1 00	Х						1,207	0	0	
DAN G PETERSEN NATIONAL COUNCIL OF ADMIN	1 00	Х						2,242	0	0	
RUSSEL L DRAMSTAD NATIONAL COUNCIL OF ADMIN	1 00	Х						1,923	0	0	
ROBERT C EILER NATIONAL COUNCIL OF ADMIN	1 00	Х						2,354	0	0	
JD SPINDLER NATIONAL COUNCIL OF ADMIN	1 00	Х						3,383	0	0	
RONALD J BUSH NATIONAL COUNCIL OF ADMIN	1 00	Х						2,363	0	0	
ROGER A FRYE NATIONAL COUNCIL OF ADMIN	1 00	Х						4,186	0	0	
JACK E TURNER NATIONAL COUNCIL OF ADMIN	1 00	Х						2,473	0	0	
ELISEO CANTU JR NATIONAL COUNCIL OF ADMIN	1 00	Х						6,428	0	0	
AE HALL NATIONAL COUNCIL OF ADMIN	1 00	Х						4,086	0	0	
GEORGE H JONES NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0	
RICHARD L EUBANK PAST COMMANDER-IN-CHIEF	40 00	Х		Х				166,747	0	8,139	
ROBERT A MYLES NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0	
TIMOTHY M BORLAND NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0	
MICHAEL K NUCKOLLS NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation					
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
BOBBY R PRICE NATIONAL COUNCIL OF ADMIN	1 00	х						1,299	0	0	
JOHN R MORROW NATIONAL COUNCIL OF ADMIN	1 00	Х						813	0	0	
HERMAN C SALLEY NATIONAL COUNCIL OF ADMIN	1 00	x						160	0	0	
PETER J MASCETTI NATIONAL COUNCIL OF ADMIN	1 00	Х						942	0	0	
NORBERT K ENOS NATIONAL COUNCIL OF ADMIN	1 00	×						1,299	0	0	
JOHN R CROTINGER NATIONAL COUNCIL OF ADMIN	1 00	Х						678	0	0	
DARRELL A BLASBERG NATIONAL COUNCIL OF ADMIN	1 00	Х						1,639	0	0	
JAMES T PLUMMER NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0	
BERNARD J DUFFY NATIONAL COUNCIL OF ADMIN	1 00	Х						918	0	0	
JOSE A CLAUDIO NATIONAL COUNCIL OF ADMIN	1 00	Х						352	0	0	
FEDERICO M ARENDS III NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0	
JACK P LEWIS NATIONAL COUNCIL OF ADMIN	1 00	Х						923	0	0	
ROLAND W GENDRON NATIONAL COUNCIL OF ADMIN	1 00	Х						925	0	0	
JOHN H PRAY NATIONAL COUNCIL OF ADMIN	1 00	Х						956	0	0	
DONALD W NIX NATIONAL COUNCIL OF ADMIN	1 00	Х						908	0	0	
DAVID J MORGAN NATIONAL COUNCIL OF ADMIN	1 00	Х						1,124	0	0	
TIMOTHY C PETERS NATIONAL COUNCIL OF ADMIN	1 00	Х						709	0	0	
HERMAN C HAGEN JR NATIONAL COUNCIL OF ADMIN	1 00	Х						264	0	0	
DAVID L OUELLETTE NATIONAL COUNCIL OF ADMIN	1 00	Х						1,720	0	0	
ALLAN W KUCHINSKY NATIONAL COUNCIL OF ADMIN	1 00	Х						918	0	0	
JAMES C GOINS JR NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0	
DALE T RONNING NATIONAL COUNCIL OF ADMIN	1 00	Х						1,059	0	0	
RICHARD R UZL JR NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0	
HARLAN BJORGO NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0	
BERT W KEY NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		(C) Position (check all that apply)				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other			
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
GERALD L KRAUS NATIONAL COUNCIL OF ADMIN	1 00	×						О	О	0		
ALLEN C WAGONBLOTT JR NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0		
DENNIS M BARBER NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0		
BRENT W NEILSEN NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0		
MALCOLM MACASKILL NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0		
JAMES K MARTIN NATIONAL COUNCIL OF ADMIN	1 00	Х						729	0	0		
JERRY W HERKER NATIONAL COUNCIL OF ADMIN	1 00	Х						700	0	0		
CHARLES E HANEY NATIONAL COUNCIL OF ADMIN	1 00	Х						1,174	0	0		
JAMES PEDERSEN NATIONAL COUNCIL OF ADMIN	1 00	Х						0	0	0		
ROBERT E WALLACE ASSISTANT ADJUTANT GENERAL	40 00			×				171,529	0	61,071		
JOHN J MCNEILL ASSISTANT ADJUTANT GENERAL	40 00			×				146,578	0	13,793		
WILLIAM BRADSHAW DIRECTOR, NATIONAL VETERANS SERVICE	40 00					Х		131,743	0	6,799		
PATRICK BOTBYL DIRECTOR OF OPERATIONS	40 00					Х		106,514	0	14,735		
JAMES J LIERZ CONTROLLER & PURCHASING & MEMBER INSURANCE MANAGER	40 00					х		104,406	0	35,489		
RICHARD KOLB DIRECTOR, PUBLICATIONS	40 00					Х		102,985	0	45,756		
MICHAEL PENNEY DIRECTOR, MILITARY ASSISTANCE PROGRAM	40 00					x		102,700	0	15,346		

DLN: 93493014007033

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

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Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

	ne of the organization ERANS OF FOREIGN WARS OF THE UNITED STATES			Empl	oyer identifica	tion numbe	er
•=	AVIIIG OF FOREIGN WING OF THE GRATES OF THE			44-0	474290		
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 99		Other Similar	Funds o	r Accounts	. Comple	te ıf the
		(a) Donor adv	rised funds	(Funds and o	ther accou	nts
•	Total number at end of year						
2	Aggregate contributions to (during year)						
}	Aggregate grants from (during year)						
ŀ	Aggregate value at end of year						
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	•		onor advis	ed	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit					┌ Yes	□ No
Par	t II Conservation Easements. Complete	if the organization	answered "Yes"	to Form	990 Part IV	•	
<u>l</u>	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	nion or pleasure)	Preservation of a	a certified	historic struct	-	a
	easement on the last day of the tax year				Held at the		Van
а	Total number of conservation easements			2a	neid at the	ena or the	rear
a b	Total acreage restricted by conservation easements	5		2b			
c	Number of conservation easements on a certified his		ed in (a)	2c			
d	Number of conservation easements included in (c) a		. a (a)	2d			
3	Number of conservation easements modified, transfer the taxable year ▶	erred, released, exting	uished, or termina	ted by the	e organization (during	
ŀ	Number of states where property subject to conserv	ation easement is loca	ted ►				
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		ng, inspection, ha	ndling of	violations, and	┌ Yes	┌ No
•	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing (onservation ease	ments du	ring the year 🕨	-	
,	A mount of expenses incurred in monitoring, inspective \$	ing, and enforcing cons	ervation easemer	nts during	the year		
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the	requirements of s	ection		┌ Yes	┌ No
)	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the org					
ar	Organizations Maintaining Collection Complete if the organization answered			, or Oth	er Similar <i>I</i>	Assets.	
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, e	education or resea	rch in fur			e,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, educ					
	(i) Revenues included in Form 990, Part VIII, line 1	L			► \$		
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, hist following amounts required to be reported under SFA			for financ	ıal gaın, provic	le the	

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
√ No
┌ No
│ No
ars Back
No
ok value
,435,663
,439,589
,518,950
<u> </u>
,394,202
,

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)200K Turuc	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		,
		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	
(a) Descrip		(b) Book value
(2)		(-,
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	5.)	
Part X Other Liabilities. See Form 990, Part X		·
(-) December of Legislation		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
LIFE MEMBER DUES FOR FUTURE DISTRIBUTION -		
STATE & POSTS	67,443,407	
PAYABLE FOR COLLATERAL RECEIVED FOR	, ,	
SECURITIES LENDING	35,280,226	
PENSION & POSTRETIREMENT LIABILITY	16,419,330	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	119,142,963	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	93,189,856
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	91,554,781
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,635,075
4	Net unrealized gains (losses) on investments	4	3,582,043
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-4,758,847
9	Total adjustments (net) Add lines 4 - 8	9	-1,176,804
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	458,271
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	107,566,372
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	15,433,431
3	Subtract line 2e from line 1	3	92,132,941
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)		
C	Add lines 4a and 4b	4 c	1,056,915
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	93,189,856
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	97,957,106
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		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	7,459,240
3	Subtract line 2e from line 1	3	90,497,866
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)	1	
C	Add lines 4a and 4b	4c	1,056,915
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	91,554,781
Pa	rt XIV Supplemental Information		

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION APPLIES THE PROVISIONS OF ASC TOPIC 740, INCOME TAXES, (ASC 740) WITH RESPECT TO UNCERTAIN TAX POSITIONS ASC 740 REQUIRES THAT ALL TAX POSITIONS BE EVALUATED USING A RECOGNITION THRESHOLD AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN DIFFERENCES BETWEEN POSITIONS TAKEN IN A RETURN AND AMOUNTS RECOGNIZED IN THE FINANCIAL STATEMENTS ARE RECORDED AS ADJUSTMENTS TO INCOME TAXES PAYABLE OR RECEIVABLE, OR ADJUSTMENTS TO DEFERRED INCOME TAXES, OR BOTH ASC 740 ALSO REQUIRES EXPANDED DISCLOSURES AT THE END OF EACH ANNUAL REPORTING PERIOD NO AMOUNTS HAVE BEEN RECORDED AT AUGUST 31, 2012 WITH RESPECT TO UNCERTAIN TAX POSITIONS
PART XI, LINE 8 - OTHER ADJUSTMENTS		PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST -5,985,746 RECEIPT OF ASSETS FROM DISSOLUTION OF VFW POLITICAL ACTION COMMITTEE 1,226,899 TOTAL TO SCHEDULE D, PART XI, LINE 8 -4,758,847
		PART XII, LINE 2D THE AMOUNT ON LINE 2D IS COMPRISED OF THE FOLLOWING AMOUNTS 1)\$7,873,656 IS REVENUE FROM THE VFW FOUNDATION THAT IS INCLUDED IN THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS, 2)\$504,912 FOR RENTAL EXPENSES THAT ARE INCLUDED IN PART VIII, LINE 6B, AND 3)\$3,472,820 IS THE COST OF GOODS SOLD THAT ARE INCLUDED ON PART VIII, LINE 10B PART XII, LINE 4B THIS REPRESENTS INTERCOMPANY ELIMINATIONS BETWEEN THE VFW AND VFW FOUNDATION ON THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS PART XIII, LINE 2D THE AMOUNT ON LINE 2D IS COMPRISED OF THE FOLLOWING AMOUNTS 1)\$3,481,508 IS EXPENSE FROM THE VFW FOUNDATION THAT IS INCLUDED IN THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS, 2)\$504,912 FOR RENTAL EXPENSES THAT ARE INCLUDED IN PART VIII, LINE 6B, AND 3)\$3,472,820 IS THE COST OF GOODS SOLD THAT ARE INCLUDED ON PART VIII, LINE 10B PART XIII, LINE 4B THIS REPRESENTS INTERCOMPANY ELIMINATIONS BETWEEN THE VFW AND VFW FOUNDATION ON THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS

DLN: 93493014007033

OMB No 1545-0047

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization VETERANS OF FOREIGN WARS OF THE UNITED STATES **Employer identification number**

44-0474290

Part I	General Information on	Activities Outside the United States.	Complete if the organization answered
	"Yes" to Form 990, Part IV	, line 14b.	

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or			
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award			
	the grants or assistance?	Yes	Γ	No

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

CENTRAL AMERICA AND THE CARIBBEAN O PROGRAM SERVICE AND DEPARTMENT AND POST ACTIVITIES EAST ASIA AND THE PACIFIC O PROGRAM SERVICE GRANTS AND POST ACTIVITIES EUROPE O PROGRAM SERVICE AND DEPARTMENT AND POST ACTIVITIES EUROPE O PROGRAM SERVICE GRANTS ACTIVITIES VETERANS SERVICE AND DEPARTMENT AND POST ACTIVITIES O CENTRAL AMERICA AND THE CARIBBEAN O INVESTMENTS O INVESTMENTS	7,5 41,8 34,5 5,690,0
PACIFIC GRANTS AND DEPARTMENT AND POST ACTIVITIES EUROPE 0 PROGRAM SERVICE VETERANS SERVICE GRANTS AND DEPARTMENT AND POST ACTIVITIES CENTRAL AMERICA AND THE 0 0 INVESTMENTS	34,5
GRANTS AND DEPARTMENT AND POST ACTIVITIES CENTRAL AMERICA AND THE 0 0 INVESTMENTS	
CENTRAL AMERICA AND THE 0 0 INVESTMENTS	5,690,0
Sub-total 0 0	5,774,0
Total from continuation sheets to Part I 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
			VETERANS SERVICE AND DEPARTMENT AND POST ACTIVITIES	19,867	ELECTRONIC FUND TRANSFER			
			VETERANS SERVICE AND DEPARTMENT AND POST ACTIVITIES	9,000	ELECTRONIC FUND TRANSFER			
			VETERANS SERVICE AND DEPARTMENT AND POST ACTIVITIES	35,570	ELECTRONIC FUND TRANSFER			
		AND THE CARIBBEAN	VETERANS SERVICE AND DEPARTMENT AND POST ACTIVITIES	6,937	ELECTRONIC FUND TRANSFER			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	[ত	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	া	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	া	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ন	Νo

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional

Information. I dentifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 PERIODIC FINANCIAL REPORTS ARE SUBMITTED BY THESE DEPARTMENTS IN ADDITION, SPECIFIC DOCUMENTATION MUST BE SUBMITTED TO JUSTIFY MOST GRANTS, INCLUDING THOSE RELATED TO MEMBERSHIP PROMOTION FINALLY, NATIONAL REPRESENTATIVES PERIODICALLY VISIT THESE
		DEPARTMENTS AND OBSERVE FIRSTHAND THE MANNER IN WHICH FUNDS ARE EXPENDED IN ADDITION, GRANTS HAVE BEEN MADE TO POSTS IN THOSE AREAS IN MOST INSTANCES THOSE GRANTS WERE MADE TO SUPPORT
		ACTIVITIES RELATING TO ASSISTING ACTIVE DUTY MILITARY PERSONNEL AND THEIR FAMILIES APPLICATIONS FOR GRANTS MUST INCLUDE SPECIFIC EXPENSE INFORMATION AND RECEIPTS MUST BE PRODUCED TO VERIFY EXPENDITURES
METHOD USED TO ACCCOUNT FOR EXPENDITURES		SCHEDULE F, PART I, LINE 3 METHOD USED TO ACCOUNT FOR EXPENDITURES ACCRUAL BASIS SCHEDULE F, PART II, LINE 1(D) - PURPOSE OF GRANT AS
		DESCRIBED IN THE CORE FORM, PART III, PARAGRAPH 4(B) OF THE STATEMENT OF PROGRAM ACCOMPLISHMENTS, THIS ORGANIZATION PROVIDES GRANTS TO THE STATE ORGANIZATIONS, CALLED DEPARTMENTS, AND LOCAL ORGANIZATIONS, CALLED POSTS, TO HELP SUPPORT THE VETERANS SERVICE PROGRAMS AND OTHER VFW SPONSORED PROGRAMS AT THE STATE AND LOCAL LEVEL BECAUSE THE ORGANIZATION HAS MEMBERS LIVING OUTSIDE THE UNITED STATES, MANY OF WHOM ARE ON ACTIVE DUTY IN THE MILITARY OR ARE EMPLOYED BY THE U S GOVERNMENT IN OVERSEAS LOCATIONS, THREE OVERSEAS DEPARTMENTS AND SEVERAL POSTS HAVE BEEN ORGANIZED TO FACILITATE MEMBERS AND PROMOTE PROGRAMS IN THOSE AREAS THE GRANTS REFLECTED IN SCHEDULE F, PART I, ARE PRIMARILY GRANTS MADE TO
		PROGRAMS, INCLUDING MEMBERSHIP PROGRAMS, IN THOSE AREAS
		Schodulo E (Form 990) 2011

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VETERANS OF FOREIGN WARS OF THE UNITED STATES

As Filed Data -

DLN: 93493014007033

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2011

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

SCHEDULE G

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Employer identification number

				.,,,,				44-047429	0			
Pa	rt I	Fundraising Ac	tivities. Complete	e if the organizat	ion a	answered "Yes" t	o Form	n 990, Part I	V, line 17	7.		
1	Indi	cate whether the orga	nızatıon raısed funds	through any of the	follo	wing activities Che	ck all t	hat apply				
а	굣	Mail solicitations		e	Γ	Solicitation of non	-goverr	ment grants				
b	<u>~</u>	Internet and e-mail so	olicitations	f		Solicitation of gov	ernmen	t grants				
c	<u>~</u>	Phone solicitations		g	\vdash	Special fundraising	g event	s				
d	Γ	In-person solicitation	S									
2a		the organization have ey employees listed ir	_	•		, -	•	•	▽	Yes	Г	No
b		es," list the ten highe e compensated at leas	•	,	, ,	•				IS		
	> >-		(T) A	("") D	· · ·		<i>(</i>) ^		() (

(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
BRICKMILL MARKETING SERVICES 24 MILL BROOK ROAD WILTON, NH 03086	DIRECT MAIL		No	65,207,041	1,169,231	64,037,810
MDS COMMUNICATIONS CORP 545 W JUANITA AVENUE MESA, AZ 85210	TELEMARKETING		No	1,293,172	1,184,415	108,757
				66,500,213	2,353,646	64,146,567

³ List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY,DC

Part I	Fundraising Events. Commore than \$15,000 on Form				
		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	(4)
1 2	Gross receipts				
2	Less Charitable				
3	contributions Gross income (line 1				
	minus line 2)				
4	Cash prizes				
5	Non-cash prizes				
6	Rent/facility costs				
. 7	Food and beverages				
8	Entertainment				
9	Other direct expenses .				
10	Direct expense summary Add lir	nes 4 through 9 in colum	an (d)	.	(
111	•	_	• •		,
art I	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		i tes lo foilii 990, Pa	rt IV, iiile 19, or repo	orted more than
		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	Gross revenue				
2	Cash prizes				
3	Non-cash prizes				
1 4					
4	Rent/racinty costs				
5	Other direct expenses				
6	Volunteer labor	┌ Yes		┌ Yes	
		Г №	ΓNο	Γ No	_
7	Direct expense summary Add line	s 2 through 5 in columr	n (d)		(
8	Net gaming income summary Com	ndine lines 1 and 7 in co	olumn (a)	<u> </u>	
	nter the state(s) in which the organiz				
Is	the organization licensed to operate	e gamıng actıvıtıes ın ea	ch of these states?		· Fyes Fno
b If	"No," Explain				
 a W	ere any of the organization's gaming				
	"Yes," Explain				- , res , NO

Identifier	ReturnReference	Explanation
IDAVMENTO	COLUMN (V)	THE AGREEMENT AND INVOICES SPECIFICALLY BREAK OUT THE PROFESSIONAL FUNDRAISING SERVICES FROM THE OTHER REIMBURSABLE COSTS OF THE DIRECT MAIL PROGRAM BRICKMILL MARKETING SERVICES WAS PAID A TOTAL OF \$36,957,789 FOR THE DIRECT MAIL PROGRAM, WHICH INCLUDED THE PAYMENT FOR PRINTING, PAPER, ENVELOPES AND POSTAGE \$1,169,231 WAS SPECIFICALLY BROKEN-OUT AS FUNDRAISING MANAGEMENT FEES

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Schedule I (Form 990)

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

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

OMB No 1545-0047

DLN: 93493014007033

Department of the Treasury ► Attach to Form 990 Inspection Internal Revenue Service Name of the organization Employer identification number VETERANS OF FOREIGN WARS OF THE UNITED STATES 44-0474290 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 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. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other) See Additional Data Table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) EDUCATIONAL ASSISTANCE	349	397,971			
(2) SCHOLARSHIPS FOR PATRIOTIC ESSAY PROGRAM	53	110,737			
(3) AWARDS FOR PATRIOTIC ESSAY PROGRAM	46	46,000			
(4) PHONE CARDS AND FREE "CALL DAYS" FOR MILITARY	1102231		568,086	IF M V	CALLING CARDS AND FREE "CALL DAYS"
(5) FOOD, SHELTER, AND UTILITIES FOR VETERANS	19	4,794			
(6) TRIP TO VIETNAM FOR PURPLE HEART AWARD RECIPIENTS	9	94,256			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 PERIODIC FINANCIAL REPORTS ARE SUBMITTED BY THESE DEPARTMENTS IN ADDITION, SPECIFIC DOCUMENTATION MUST BE SUBMITTED TO JUSTIFY MOST GRANTS, INCLUDING THOSE RELATED TO MEMBERSHIP PROMOTION FINALLY, NATIONAL REPRESENTATIVES PERIODICALLY VISIT THESE DEPARTMENTS AND OBSERVE FIRSTHAND THE MANNER IN WHICH FUNDS ARE EXPENDED IN ADDITION, GRANTS HAVE BEEN MADE TO POSTS IN THOSE DEPARTMENTS IN MOST INSTANCES THOSE GRANTS WERE MADE TO SUPPORT ACTIVITIES RELATING TO ASSISTING ACTIVE DUTY MILITARY PERSONNEL AND THEIR FAMILIES APPLICATIONS FOR GRANTS MUST INCLUDE SPECIFIC EXPENSE INFORMATION AND RECEIPTS MUST BE PRODUCED TO VERIFY EXPENDITURES
		PART II, QUESTION 1(H) PURPOSE OF GRANT - AS DESCRIBED IN THE CORE FORM, PART III, PARAGRAPH 4(B) OF THE STATEMENT OF PROGRAM ACCOMPLISHMENTS, THIS ORGANIZATION PROVIDES GRANTS TO THE STATE ORGANIZATIONS, CALLED DEPARTMENTS, AND LOCAL ORGANIZATIONS, CALLED POSTS, TO HELP SUPPORT THE VETERANS SERVICE PROGRAMS AND OTHER VFW SPONSORED PROGRAMS AT THE STATE AND LOCAL LEVEL THE GRANTS REFLECTED IN SCHEDULE I, PART II, ARE PRIMARILY GRANTS MADE TO THOSE DEPARTMENTS AND POSTS TO FURTHER VFW PROGRAMS, INCLUDING MEMBERSHIP PROGRAMS

Software ID: Software Version:

EIN: 44-0474290

Name: VETERANS OF FOREIGN WARS OF THE UNITED STATES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF ALABAMA1231 CARMICHAEL WAY MONTGOMERY, AL 36123	63- 0243614	501 (C)(19)	70,384				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF ALASKA2925 DEBARR RD STE 3106 ANCHORAGE, AK 99514	92- 0017695	501 (C)(19)	30,178				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF ARIZONA6907 E THOMAS RD SCOTTSDALE, AZ 85251	86- 0076886	1 5017676191	113,849				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF ARKANSAS1719 BROADWAY ST LITTLE ROCK,AR 72206	71- 0184020	1 5017(1)(19)	56,540				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF CALIFORNIA 1510 J ST SACREMENTO, CA 95814	94- 0955210	1 501 (C)(19)	591,410				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF COLORADO 1400 CARR ST LAKEWOOD, CO 80214	84- 0360493	1 501 (C)(19)	141,838				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF CONNECTICUT 287 WEST ST ROCKY HILL, CT 06067	06- 0575593	501 (C)(4)	80,796				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF DELAWARE6 BROOKSIDE DR WILMINGTON, DE 19804	51- 0057830	501 (C)(4)	49,357				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DISTRICT OF COLUMBIA4704 CEDELL PL TEMPLE HILLS,MD 20748	53- 0175153	1 501 ((*)(4)	12,187				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF FLORIDA 543 SANCHEZ AVE OCALA, FL 34470	59- 0494095	501 (C)(19)	344,960				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF GEORGIA4952 COLUMBUS RD MACON,GA 31212	58- 0512677	1 5017/10191	89,489				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF HAWAII2127A PAUOA RD HONOLULU, HI 96813	99- 0040331	501 (C)(19)	35,035				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV,	(g) Description of non-cash	(h) Purpose of grant or assistance
5		,,			appraisal, other)	assistance	
VFW DEPARTMENT OF IDAHO1425 S ROOSEVELT ST BOISE,ID 83705	82- 0182104	501 (C)(19)	30,251				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF ILLINOIS3300 CONSTITUTION DR SPRINGFIELD,IL 62707	37- 6059313	501 (C)(19)	326,801				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF INDIANA9555 E 59TH ST INDIANAPOLIS,IN 46216	35- 6042820	501 (C)(19)	143,163				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF IO WA 3601 BEAVER AVE DES MOINES, IA 50310	42- 0331186	501 (C)(19)	83,795				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF KANSAS115 SW GAGE BLVD TOPEKA,KS 66606	48- 0641005	501 (C)(19)	92,950		ourer)		VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF KENTUCKY3031 POPLAR LEVEL RD LOUISVILLE, KY 40217	61- 0406448	501 (C)(19)	73,963				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF LOUISIANA 10185 MAMMOTH AVE BATON ROUGE, LA 70814	72- 0499659	501 (C)(19)	57,801				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF MAINE64 WASHBURN ST CARIBOU, ME 04736	01- 0191822	501 (C)(19)	59,086				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF MARYLAND101 N GAY ST BALTIMORE, MD 21202	52- 0517415	1 501 (()(19)	150,233				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF MASSACHUSETTES24 BEACON ST BOSTON, MA 02133	04- 1242419	1 501 ((1)(19)	162,652				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF MICHIGAN924 N WASHINGTON AVE LANSING, MI 48906	38- 1133442	501 (C)(19)	256,129				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF MINNESOTA 20 W 12TH ST ST PAUL, MN 55155	41- 0593068	501 (C)(19)	151,103				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF MISSISSIPPI 120 N STATE ST JACKSON, MS 39201	64- 0275576	501 (C)(4)	37,156				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF MISSOURI2420 HYDE PARK DR JEFFERSON CITY, MO 65109	44- 0515305	501 (C)(19)	158,959				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF MONTANA1900 WILLIAMS ST HELENA,MT 59601	81- 0225542	501 (C)(4)	79,787				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF NEBRASKA2431 N 48TH ST LINCOLN, NE 68504	47- 0343845	501 (C)(19)	45,513				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF NEVADA121 W 3RD ST HAWTHORNE, NV 89415	88- 0055900	501 (C)(19)	84,779				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF NEW HAMPSHIRE22 RIDGEVIEW TER DALTON, NH 03598	02- 0213632	501 (C)(19)	87,543				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF NEW JERSEY135 W HANOVER ST TRENTON, NJ 08618	21- 0586655	501 (C)(19)	208,847				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF NEW MEXICOPO BOX 8411 ALBUQUERQUE, NM 87198	85- 0123009	501 (C)(19)	58,801				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF NEW YORK1044 BROADWAY ALBANY,NY 12204	13- 1436995	501 (C)(19)	327,544				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF NORTH CAROLINAPO BOX 25337 RALEIGH, NC 27611	56- 0470953	501 (C)(19)	171,604				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF NORTH DAKOTA802 KENNEDY CT N FARGO,ND 58702	45- 0215848	1 5017636191	63,993				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF OHIO35 E CHESTNUT ST COLUMBUS,OH 43215	31- 4332217	501 (C)(19)	280,376				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF OKLAHOMA 2311 N CENTRAL AVE OKLAHOMA CITY, OK 73105	73- 0496245	501 (C)(19)	78,897				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF OREGON12440 NE HALSEY ST PORTLAND, OR 97230	93- 0304245	501 (C)(19)	116,191				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF PENNSYLVANIA 201 N FRONT ST HARRISBURG,PA 17101	23- 1182480	501 (C)(4)	411,555				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF RHODE ISLAND1 CAPITOL HILL PROVIDENCE, RI 02908	05- 0254985	501 (C)(19)	70,820				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF SOUTH CAROLINA210 GLASSMASTER RD LEXINGTON, SC 29072	57- 0279614	501 (C)(4)	69,737				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF SOUTH DAKOTA 5309 W 52ND ST SIOUX FALLS, SD 57106	46- 0210486	501 (C)(4)	27,995				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF TENNESSEE311 6TH AVE NASHVILLE, TN 37243	62- 6050445	501 (C)(19)	70,198		other)		VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF TEXAS8503 NORTH IH-35 AUSTIN,TX 78753	74- 0964465	501 (C)(19)	407,940				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF UTAH1114 N 390 W SUNSET,UT 84015	87- 0200672	501 (C)(19)	75,881				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF VERMONT126 STATE ST MONTPELIER, VT 05602	03- 0179180	501 (C)(19)	78,538				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF VIRGINIA403 LEE JACKSON HWY STAUNTON, VA 24401	54- 0449022	501 (C)(19)	129,013				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF WASHINGTON 5213 PACIFIC HWY E FIFE,WA 98424	91- 0454080	501 (C)(19)	166,817				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF WEST VIRGINIA 5532 MACCORKLE AVE SW S CHARLESTON, WV 25309	55- 0320759	1 501 (()(19)	42,289				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW DEPARTMENT OF WISCONSIN214 N HAMILTON ST FL 1 MADISON, WI 53703	39- 0677613	1 501 (C)(19)	171,609				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW DEPARTMENT OF WYOMING59 STRAWBERRY HILL RD HULETT, WY 82720	83- 6005906	1 5017637191	62,018				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF ALABAMA13230 ALABAMA ST ELBERTA, AL 36530	63- 0695811	501 (C)(19)	6,630				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV,	(g) Description of non-cash	(h) Purpose of grant or assistance
					appraisal, other)	assistance	
LADIES AUXILIARY DEPARTMENT OF ARIZONA5630 S 41ST WAY PHOENIX, AZ 85040	86- 0828017	501 (C)(19)	8,361				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF CALIFORNIA3100 FITE CIRCLE SACRAMENTO, CA 95827	94- 1011531	501 (C)(19)	41,735				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF COLORADOPO BOX 262 SOUTH FORK, CO 81154	84- 6033115	501 (C)(19)	15,997				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF FLORIDAPO BOX 773490 OCALA,FL 34477	23- 7326563	501 (C)(19)	18,488				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF ILLINOISPO BOX 62 AROMA PARK,IL 60910	36- 2385214	501 (C)(19)	24,168				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF INDIANAPO BOX 86 MORRIS,IN 47033	35- 6042937	501 (C)(19)	13,225				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF IOWA1812 19TH ST HARLAN,IA 51537	42- 6062345	501 (C)(19)	5,115				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF KANSASPO BOX 158 OSWEGO, KS 67356	48- 0507090	501 (C)(19)	17,580				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization	(b) EIN	(c) IRC Code section	(d) A mount of cash grant	non-cash	valuation	(g) Description of	grant
or government		ıf applıcable		assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
LADIES AUXILIARY DEPARTMENT OF MARYLAND26595 BLUE JAY LN HEBRON, MD 21830	52- 1407051	501 (C)(19)	10,054				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF MINNESOTA25733 JASON AVE CHISAGO CITY, MN 55013	41- 0664094	501 (C)(19)	34,305				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF MISSOURI2189 FOREST LANE ARNOLD, MO 63010	23- 7203133	1 5017637191	14,050				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF NEBRASKA311 OAK ST STEINAUER, NE 68441	47- 6028250	1 5017(119)	8,481				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF NEW JERSEY1224 81ST ST NORTH BERGEN,NJ 07047	22- 3086413	501 (C)(19)	11,779				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF NEW YORK1044 BROADWAY ALBANY,NY 12204	14- 1682753	501 (C)(19)	25,933				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF NORTH DAKOTAPO BOX 191 MAYVILLE,ND 58257	23- 7336346	501 (C)(19)	5,765				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF OKLAHOMAPO BOX 95726 OKLAHOMA CITY, OK 73143	73- 6096027	501 (C)(19)	6,311				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF OREGONPO BOX 1134 MEDFORD, OR 97501	93- 6025794	501 (C)(19)	7,430				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF PENNSYLVANIA 4002 FENTON AVE HARRISBURG, PA 17109	23- 1642712	501 (C)(4)	18,290				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF TEXAS2839 MCKINZIE RD 1 CORUPUS CHRISTI, TX 78410	74- 6074588	501 (C)(19)	17,290		23.761)		VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF VIRGINIA539 WESTWOOD DR RICKERSVILLE,VA 22968	54- 0697456	501 (C)(19)	10,194				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF WASHINGTON5213 PACIFIC HWY E FIFE,WA 98424	91- 0499052	501 (C)(19)	19,138				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY DEPARTMENT OF WISCONSINPO BOX 666 SILVER LAKE, WI 16275	39- 6056026	501 (C)(19)	16,275				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LADIES AUXILIARY DEPARTMENT OF WYOMINGPO BOX 21509 CHEYENNE, WY 82003	51- 0163580	501 (C)(19)	5,372				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
LADIES AUXILIARY NATIONAL HEADQUARTERS406 WEST 34TH ST KANSAS CITY, MO 64111	44- 0319970	1 501 (C)(19)	6,399				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARINE CORP SCHOLARSHIP FOUNDATION 11232 PFLUMM RD OVERLAND PARK, KS 66215	43- 1774305	501 (C)(3)	25,000		otile!)		VETERANS SERVICE
ALEETHIA FOUNDATION1718 M ST NW WASHINGTON, DC	51- 0529300	501 (C)(3)	8,423				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW NATIONAL HOME3573 WAVERLY RD S EATON RAPIDS, MI 48827	38- 1359597	501 (C)(3)	114,318				VETERANS SERVICE
WORLD WAR I MUSEUM100 W 26TH ST KANSAS CITY, MO 64108	43- 6052673	501 (C)(3)	100,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP WOODS YMCA1101 CAMP WOOD RD ELMDALE, KS 66850	48- 0908238	501 (C)(3)	20,000				VETERANS SERVICE
FORT CAMPBELL FAMILY MORAL AND WELFAIR RELIEF FUND5663 SCREAMING EAGLE BLVD FT CAMPBELL,KY	58- 1666932		25,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IMWFR-WHITE SANDS MISSLE RANGE F&MWRPO BOX 400 WHITE SANDS MISSLE RAN, NM 88002	02- 1909440		25,000				VETERANS SERVICE
HONOR FLIGHT OF KANSAS CITY 8559 N LINE CREEK PKWY KANSAS CITY, MO 64154	20- 2116024	501 (C)(3)	15,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IFMWRFBLDG 4248 1681 BULLION BLVD FT KNOX,KY 40121	61- 1054163		5,000				VETERANS SERVICE
KAUFMAN CENTER FOR PERFORMING ARTS1601 BROADWAY BLVD KANSAS CITY, MO 64108	43- 1866550	501 (C)(3)	8,280				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STUDENT VETERANS OF AMERICAPO BOX 77673 WASHINGTON, DC 20013	26- 1971279	501 (C)(3)	10,000				VETERANS SERVICE
WOMEN IN MILITARY SERVICE FOR AMERICA MEMORIALCIRCLE 500 WASHINGTON, DC 20042	52- 1513535	501 (C)(3)	5,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARINE CORPS COMMUNITY SERVICES QUANTICO 3044 CATLIN AVE QUANTICO, VA 22134	62- 1383809		6,000				VETERANS SERVICE
USO 2111 N WILSON BLVD ARLINGTON, VA 22201	13- 1610451	501 (C)(3)	15,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW POST 10047 4337 N LAS VEGAS BLVD LAS VEGAS, NV 89115	88- 0103973	1 5017637191	11,813				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
NORTHLAND JC FOUNDATION6300 NINDIANA GLADSTONE, MO 64119	43- 1806775	1 5017(3)	15,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIETNAM WOMEN VETERANS10185 MAMMOTH AVE BATON ROUGE, LA 70814	72- 1280875	501 (C)(19)	5,000				VETERANS SERVICE
ST JOSEPH DEVELOPMENT CORP CHARITABLE FUND3003 FREDERICK AVE ST JOSEPH, MO 64506	43- 1524243	501 (C)(3)	10,000				VETERANS SERVICE

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW POST 3359 11421 CHAIRMAN DR DALLAS,TX 75213	75- 1424522	501 (C)(19)	5,420				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW POST 5619 11511 SAGE VALLEY DR HOUSTON,TX 77059	74- 6063788	501 (C)(19)	6,773				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VFW POST 8108 PO BOX 2513 RIVERVIEW, FL 33568	59- 3240975	501 (C)(19)	7,956				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES
VFW POST 912000 S UNION AVE TACOMA, WA 98405	91- 6032570	501 (C)(19)	7,196				VETERANS SERVICE, COMMUNITY SERVICE AND DEPARTMENT AND POST ACTIVITIES

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DLN: 93493014007033

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

VEI	ELEKANS OF FOREIGN WARS OF THE UNITED STATES	4 3 6 6			
-	44-0474	1290			
- 6	art I Questions Regarding Compensation			,,	
_		. г		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in F 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these is				
	First-class or charter travel	use			
	▼ Travel for companions	ence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (e.g., maid, chauffeur, che	f)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain)r	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the				
_	organization's CEO/Executive Director Check all that apply				
	Compensation committee Written employment contract				
	☐ Independent compensation consultant ☐ Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensation com	mıttee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line $1a$ with respect to the filing or a related organization	rganization			
а	Receive a severance payment or change-of-control payment?		4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	ı 📙			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.				
5	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of				
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III				

payments not described in lines 5 and 6? If "Yes," describe in Part III

compensation contingent on the net earnings of

If "Yes," to line 6a or 6b, describe in Part III

The organization?

in Part III

Any related organization?

section 53 4958-6(c)?

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe 6a 6b

7

8

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	'	(B) Breakdown of	f W-2 and/or 1099-MI	.SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) RICHARD L DENOYER	(ı) (ıı)	155,808 0	0	12,352	7,618	1,239 0	177,017	,
(2) LAWRENCE M MAHER	(ı) (ıı)	179,085 0	0	10,484	9,130	18,837 0	7 217,536 0 0	,
(3) ALLEN F KENT	(ı) (ıı)	182,312 0	0	8,465 0	30,243	1,239 0	222,259	,
(4) ROBERT B GREENE	(I) (II)	137,492 0	0	257	49,525	18,837 0	206,111	,
(5) RICHARD L EUBANK	(I) (II)	147,896 0	0	18,851	7,313	826 0	174,886	,
(6) ROBERT E WALLACE	(I) (II)	164,888 0	0	6,641	42,209	18,862 0	2 232,600	,
(7) JOHN J MCNEILL	(I) (II)	145,100 0	ol	1,478	12,554	1,239 0	160,371	,
	'		<u> </u>	<u> </u>		 	<u> </u> '	<u> </u>
				<u> </u>	 		'	
	<u> </u>	<u> </u> '	 	 '	 	 	<u> </u>	<u> </u>
	<u>'</u>			<u> </u>	 		<u> </u>	
	 '	-		 	+		-	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
	1A	FIRST CLASS TRAVEL IS AUTHORIZED FOR CERTAIN OFFICERS UNDER CERTAIN CIRCUMSTANCES, BUT IS NOT GENERALLY AUTHORIZED FOR MOST OFFICERS, DIRECTORS OR KEY EMPLOYEES AND IS NOT USED, EVEN WHEN AUTHORIZED, IN MOST INSTANCES SPOUSAL TRAVEL IS NOT GENERALLY AUTHORIZED FOR OFFICERS AND DIRECTORS, BUT IS AUTHORIZED BY WRITTEN POLICY FOR CERTAIN OFFICERS AND DIRECTORS FOR SPECIFIC ACTIVITIES
	PART I, LINE 4A	LAWRENCE MAHER RECEIVED A \$199,910 SEVERANCE PAYMENT IN 2012 FOR HIS MANY YEARS OF LOYAL SERVICE TO THE ORGANIZATION

Schedule J (Form 990) 2011

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As Filed Data -

DLN: 93493014007033

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(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 to provide any additional information. ► Attach to Form 990 or 990-EZ.

Name of the organization **Employer identification number** VETERANS OF FOREIGN WARS OF THE UNITED STATES 44-0474290

Identifier	Return Reference	Explanation
	, , ,	THE VFW EXPANDED THE NUMBER OF MEMBERS ON ITS NATIONAL COUNCIL OF ADMINISTRATION FROM THIRTY-NINE TO SIXTY-FIVE, AND THE TERM OF THEIR OFFICE HAS BEEN EXPANDED FROM TWO YEARS TO FOUR YEARS

ĺ	ldentifier	Return Reference	Explanation
I		FORM 990, PART VI, SECTION A, LINE 6	SEE ANSWER TO FORM 990, PART VI, SECTION A, QUESTION 1A

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS, ACTING THROUGH DELEGATES SELECTED BY VFW POSTS, ELECT CERTAIN NATIONAL OFFICERS AT THE NATIONAL CONVENTION IN ADDITION, ALTHOUGH DECISIONS OF THE NATIONAL COUNCIL OF ADMINISTRATION ARE NOT SUBJECT TO APPROVAL BY THE MEMBERS, MEMBERS ACTING THROUGH DELEGATES AT THE NATIONAL CONVENTION MAY MAKE DECISIONS THAT ARE BINDING ON THE NATIONAL COUNCIL OF ADMINISTRATION AND THE ORGANIZATION

Identifier	Return Reference	Explanation
	1	THIS 990 WAS PREPARED BY AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT WHO WORKED WITH PROFESSIONAL EMPLOYEES IN THE ACCOUNTING DEPARTMENT OF THE VFW NATIONAL HEADQUARTERS IT WAS REVIEWED BY THE PRINCIPAL OFFICERS OF THE ORGANIZATION PRIOR TO EXECUTION IN ADDITION, A COPY WAS PROVIDED TO EACH MEMBER OF THE GOVERNING BODY, THE NATIONAL COUNCIL OF ADMINISTRATION, PRIOR TO THE TIME OF FILING FOR THEIR REVIEW

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	IN ORDER TO SUSTAIN THE VETERANS OF FOREIGN WARS OF THE UNITED STATES' REPUTATION AND CONTINUED SUCCESS, NATIONAL OFFICERS, COUNCIL MEMBERS, EMPLOYEES AND MEMBERS IN LEADERSHIP POSITIONS ARE EXPECTED TO CONDUCT THEMSELVES IN A PROFESSIONAL MANNER AND ADHERE TO THE HIGHEST STANDARDS OF HONESTY AND INTEGRITY ALL OF THE ABOVE NAMED INDIVIDUALS ARE REQUIRED TO EXECUTE AN APPROPRIATE ACKNOWLEDGEMENT OF ADHERENCE TO A CODE OF ETHICS POLICY UPON ASSUMING THEIR POSITIONS AND NATIONAL OFFICERS, COUNCIL MEMBERS, AND KEY EMPLOYEES ARE REQUIRED TO MAKE ANNUAL DISCLAIMER OR DISCLOSURE OF CONFLICTS OF INTEREST IN ACCORDANCE WITH THE INTERNAL REVENUE SERVICE GUIDELINES

ldentifier R	Return Reference	Explanation
PA SE	ART VI, ECTION B, INE 15B	THE ORGANIZATIONS CEO, THE COMMANDER-IN-CHIEF, AND THE TWO VICE COMMANDERS-IN-CHIEF ARE ELECTED BY THE NATIONAL CONVENTION AND TYPICALLY SERVE A SINGLE, ONE YEAR TERM IN EACH POSITION THEIR COMPENSATION IS SPECIFICALLY ESTABLISHED BY THE NATIONAL COUNCIL OF ADMINISTRATION (BOARD OF DIRECTORS) AND IS SPECIFICALLY APPROVED BY THE NATIONAL COUNCIL OF ADMINISTRATION AS PART OF ITS DELIBERATION AND APPROVAL OF THE ANNUAL BUDGET HOWEVER, BECAUSE OF THE UNIQUE DUTIES AND RESPONSIBILITIES OF THESE OFFICERS, COMPARABILITY DATA IS NOT TYPICALLY RELEVANT THE ORGANIZATION HAS IN PLACE A SALARY ADMINISTRATION POLICY THAT APPLIES TO OTHER COMPENSATED OFFICERS AND KEY EMPLOYEES THAT POLICY USES COMPARABILITY DATA TO ASSIGN ALL EMPLOYEE POSITIONS INTO 1 OF 21 GRADES AND TO ESTABLISH SALARY RANGES FOR EACH GRADE. INCREASES IN COMPENSATION ARE BASED ON ANNUAL EVALUATIONS. THE NATIONAL COUNCIL OF ADMINISTRATION, AS PART OF ITS DELIBERATION ON THE ANNUAL BUDGET, APPROVES ALL SALARIES, INCLUDING THE OTHER OFFICERS AND KEY EMPLOYEES.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	THE VETERANS OF FOREIGN WARS OF THE UNITED STATES COMPLIES WITH IRC SECTION 6104 AND MAKES ITS FORM 1023 AND FORM 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST TO MEMBERS OF THE VETERANS OF FOREIGN WARS THE BY-LAWS OF THE ORGANIZATION ARE ALSO AVAILABLE FOR PURCHASE THROUGH THE ORGANIZATION'S ON-LINE EMBLEMATIC SUPPLY STORE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 3,582,043 PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST -5,985,746 RECEIPT OF ASSETS FROM DISSOLUTION OF VFW POLITICAL ACTION COMMITTEE 1,226,899 TOTAL TO FORM 990, PART XI, LINE 5 - 1,176,804

ldentifier	Return Reference	Explanation
YEAR OF FORMATION	FORM 990, PAGE 1, QUESTION L	VETERANS OF FOREIGN WARS OF THE UNITED STATES WAS FORMED AS AN UNINCORPORATED ASSOCIATION IN 1899 IT WAS CHARTERED AS A CORPORATION IN 1936 BY AN ACT OF CONGRESS PUBLIC LAW NO 630 - 74TH CONGRESS (H R 11454) 36 U S C 230101 ET SEQ

ldentifier	Return Reference	Explanation
STATE OF LEGAL DOMICILE	FORM 990, PAGE 1, QUESTION M	THE ORGANIZATION IS CONGRESSIONALLY CHARTERED HEADQUARTERS ARE LOCATED IN KANSAS CITY, MISSOURI

ldentifier	Return Reference	Explanation
TOTAL NUMBER OF VOLUNTEERS	FORM 990, PART I, QUESTION 6	MORE THAN THREE THOUSAND VOLUNTEERS ARE ESTIMATED TO PARTICIPATE DIRECTLY IN THE NATIONAL ORGANIZATION ACTIVITIES THESE VOLUNTEERS SERVE ON VARIOUS COMMITTEES THAT WORK ON VETERANS SERVICE ACTIVITIES, NATIONAL MILITARY SERVICE ACTIVITIES, LEGISLATIVE SERVICE ACTIVITIES AND COMMUNITY SERVICE ACTIVITIES MORE IMPORTANTLY, HUNDREDS OF THOUSANDS OF MEMBERS, AND THEIR FAMILIES, ARE ESTIMATED TO PARTICIPATE WITH THEIR RESPECTIVE STATE ORGANIZATIONS AND POSTS IN PROGRAMS SPONSORED OR CONDUCTED BY THE VETERANS OF FOREIGN WARS OF THE UNITED STATES FOR INSTANCE, OVER 8 6 MILLION HOURS OF VOLUNTEER SERVICE WERE REPORTED BY VFW POSTS TO THE VFW NATIONAL HEADQUARTERS LAST YEAR IN SUPPORT OF THE ORGANIZATION'S COMMUNITY AND VETERANS SERVICE PROGRAMS

ldentifier	Return Reference	Explanation
POLICIES - ADDITIONAL INFORMATION	FORM 990, PART VI, SECTION B, LINES 10A AND 10B	PURSUANT TO ITS CONGRESSIONAL CHARTER, THE VETERANS OF FOREIGN WARS OF THE UNITED STATES ISSUES CHARTERS TO STATE ORGANIZATIONS CALLED "IDEPARTIMENTS" THOSE DEPARTIMENTS ARE ETHER UNINCORPORATED OR A RE INCORPORATED UNDER THE LAWS OF THE STATE IN WHICH THEY ARE LOCATED EACH DEPARTIMENT GOVERNS ITSELF AND ELECTS ITS OWN OFFICERS DEPARTIMENTS CONDUCT THEIR OWN PROGRAMS, DIRECT AND MANAGE THEIR BUSINESS AND FINANCIAL AFFARS AND OWN AND MAINTAIN THEIR OWN PROPERTY PURSUANT TO ITS CONGRESSIONAL CHARTER, THE VETERANS OF FOREIGN WARS OF THE UNITED STATES ALSO ISSUES CHARTERS TO LOCAL ORGANIZATIONS CALLED "POSTS" THOSE POSTS ARE ETHER UNINCORPORATED ASSOCIATIONS OR ARE INCORPORATED UNDER THE LAWS OF THE STATE IN WHICH THEY ARE LOCATED EACH POST GOVERNS. THOSE POSTS CONDUCT THEIR OWN PROGRAMS, DIRECT AND MANAGE THEIR OWN BUSINESS AND FINANCIAL AFFAIRS, AND OWN AND MAINTAIN THEIR OWN PROPERTY THE RELATIONSHIP BETWEEN VETERANS OF FOREIGN WARS OF THE UNITED STATES AND A STATE DEPARTMENT OR A POST ARE ESTABLISHED BY THE CHARTER AND SET FORTH IN THE BY-LAWS AND MANUAL OF PROCEDURE OF THE VETERANS OF FOREIGN WARS OF THE UNITED STATES SECTION 709 OF THE MANUAL OF PROCEDURES PROVIDES, IN PART VETERANS OF FOREIGN WARS OF THE UNITED STATES SECTION 709 OF THE MANUAL OF PROCEDURES PROVIDES, IN PART VETERANS OF FOREIGN WARS OF THE UNITED STATES SECTION 709 OF THE MANUAL OF PROCEDURES PROVIDES, IN PART VETERANS OF FOREIGN WARS OF THE UNITED STATES HAS ISSUED CHARTERS TO THE LADIES AUXILIARY, DEPARTMENTS AND OTHER UNITS, INCLUDING POSTS PURSUANT TO THEIR CHARTERS, THOSE UNITS ARE BOUND TO PURSUE THE PURPOSES SET FORTH IN THE LEGISLATION, VETERANS OF FOREIGN WARS OF THE UNITED STATES HAS ISSUED CHARTERS TO THE CHARTERS, THOSE UNITS ARE BOUND TO PURSUE THE PURPOSES SET FORTH IN THE LAWS AND USAGES OF THE VETERANS OF FOREIGN WARS OF THE UNITED STATES HAS ISSUED CHARTERS TO THE CHARTERS, THOSE UNITS ARE BOUND TO PURSUE THE PURPOSES OF THE HINTED STATES DOES NOT OWN AN INTEREST IN ANY CLUBROOM, CANTEEN, FACILITIES AND OTHER FUNDERAISING AC

ldentifier	Return Reference	Explanation
GOVERNING BODY AND MANAGEMENT	FORM 990, PART VI, SECTION A, LINE 1A	PLENARY POWER CAN BE EXERCISED BY THE ANNUAL NATIONAL CONVENTION OF THE VETERANS OF FOREIGN WARS OF THE UNITED STATES, PRIMARILY UNDER THE POWER OF THE CONVENTION TO AMEND THE BY-LAWS OF THE ORGANIZATION THE NATIONAL CONVENTION CONSISTS OF CERTAIN PRESENT AND PAST NATIONAL OFFICERS, MEMBERS OF THE NATIONAL COUNCIL OF ADMINISTRATION, CERTAIN OFFICERS OF THE SEPARATE STATE ORGANIZATIONS AND THOUSANDS OF DELEGATES ELECTED BY POSTS HOWEVER, ADMINISTRATION OF THE ORGANIZATION'S AFFAIRS BETWEEN CONVENTIONS IS VESTED IN THE NATIONAL COUNCIL OF ADMINISTRATION, WHICH SERVES AS THE ORGANIZATION'S BOARD OF DIRECTORS AMONG THE DUTIES OF THE COUNCIL IS BUDGETING, THE ESTABLISHMENT OF SALARIES FOR OFFICERS AND EMPLOYEES AND APPROVAL OF POLICIES AND PROCEDURES THE COUNCIL CONSISTS OF CERTAIN ELECTED AND APPOINTED OFFICERS, NUMBERING 11, AND REGIONAL NATIONAL COUNCIL MEMBERS WHO REPRESENT MEMBERS IN EACH STATE AND ARE ELECTED BY DELEGATES AT THEIR RESPECTIVE STATE ORGANIZATION'S CONVENTIONS THE REGIONAL NATIONAL COUNCIL MEMBERS TOTAL 54 AND CONSIST OF A REPRESENTATIVE FROM EACH OF THE FIFTY STATES, THE DISTRICT OF COLUMBIA, AND THREE OVERSEAS DEPARTMENTS THREE MEMBERS OF THE NATIONAL COUNCIL OF ADMINISTRATION ARE APPOINTED, RATHER THAN ELECTED APPOINTED MEMBERS HAVE ALL VOTING RIGHTS OF ELECTED MEMBERS EXCEPT THAT THEY DO NOT VOTE ON THE APPOINTMENT OR REMOVAL OF SALARIED OFFICERS OF THE ORGANIZATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

DLN: 93493014007033

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization VETERANS OF FOREIGN WARS OF THE UNITED STATES				Employer 44-0474	identification number		
Part I Identification of Disregarded Entities (Comp	lete if the organization	on answered "Yes'	" on Form 990, Pa	•			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during	izations (Complete the tax year.)	ıf the organization	n answered "Yes"	on Form 990,	Part IV, line 34 becau	ise it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c)		Section 5 cont	(g) 512(b)(13 trolled nızatıon
(1) VETERANS OF FOREIGN WARS FOUNDATION						Yes	No
406 W 34TH STREET KANSAS CITY, MO 64111	VETERANS SERVICE	МО	501(C)(3)		LINE 7 N/A		No
43-1758998						_	+
For Privacy Act and Paperwork Reduction Act Notice, see the Instructi	ons for Form 990.	Cat No 50	0135Y	•	Schedule R (Form 990) 2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	pox 20 of managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
												i

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

Schedule R (Form 990) 2011			Рa	ge 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990,	Part IV, line 34, 35, 35A, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in P	Parts II-IV?			П
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	Yes	
b Gift, grant, or capital contribution to related organization(s)		1b		No
c Gift, grant, or capital contribution from related organization(s)		1 c	Yes	
d Loans or loan guarantees to or for related organization(s)		1d		No
e Loans or loan guarantees by related organization(s)		1e		No
f Sale of assets to related organization(s)		1f		No
g Purchase of assets from related organization(s)		1 g		No
h Exchange of assets with related organization(s)		1h		No
i Lease of facilities, equipment, or other assets to related organization(s)		1i		No
j Lease of facilities, equipment, or other assets from related organization(s)		1j		No
k Performance of services or membership or fundraising solicitations for related organization(s)		1k		No
I Performance of services or membership or fundraising solicitations by related organization(s)		11		No
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1m		No
n Sharing of paid employees with related organization(s)		1n		No
• Reimbursement paid to related organization(s) for expenses		10		No
p Reimbursement paid by related organization(s) for expenses		1р	Yes	
q Other transfer of cash or property to related organization(s)		1q		No
r Other transfer of cash or property from related organization(s)		1r		No

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) VETERANS OF FOREIGN WARS FOUNDATION	С	1,056,915	
(2) VETERANS OF FOREIGN WARS FOUNDATION	Р	757,524	
(3) VETERANS OF FOREIGN WARS FOUNDATION	А	61,749	
(4)			
(5)			
7.00		· · · · · · · · · · · · · · · · · · ·	1

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section t 501(c)(3) organizations?		(f) Share of Share of total income assets		(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No							

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493014007033

OMB No 1545-0172

Form **4562**

 $A\,tta\,c\,h\,ment$

ntemal Revenue Service (99)	•	See separate i	inst ruct ions	. 🏲 Attach i	to your tax re	et urn.		Sequence No 179
Name(s) shown on return VETERANS OF FOREIGN	WARS OF THE U	UNITED	Business	or activity to w	hich this form	n relates	Id	dentifying number
STATES			FORM 99	0 PAGE 10			4	4-0474290
Part I Election 1	To Expense (Certain Pro	perty Un	der Section	179			
	<u>ou have any li</u>	sted propert	y, complet	te Part V befo	ore you con	nplete Part I.	<u> </u>	
1 Maximum amount (see	•						1	500,000
2 Total cost of section 1							2	
3 Threshold cost of secti				•	uctions) .		3	2,000,000
4 Reduction in limitation	Subtract line 3	from line 2 If	zero or less	s, enter -0-			4	
5 Dollar limitation for tax		line 4 from line	e 1 Ifzero o	or less, enter -0)- If married	filing		
separately, see instruc	tions						5	
6 (a) [Description of pr	operty		(b) Cost (bu		(c) Elected c	ost	
					,,			
7 Listed property Enter 1					7			
8 Total elected cost of se	ection 179 prop	erty Addamo	unts ın colu	mn (c), lines 6	and 7 .		8	
9 Tentative deduction E	nter the smaller	of line 5 or line	e8 .				. 9	
10 Carryover of disallowed	d deduction from	line 13 of you	ır 2010 For	m 4562 .			10	
11 Business income limitation I	Enter the smaller of	business income	(not less than	zero) or line 5 (se	e instructions)		11	
12 Section 179 expense of	leduction Add li	nes 9 and 10,	but do not	enter more thar	n line 1 <u>1</u> •		12	
13 Carryover of disallowed	d deduction to 2	012 Add lines	9 and 10, I	ess line 12	. 13			
Note: Do not use Part .								
								y) (See instructions)
14 Special depreciation al tax year (see instruction		ified property	(other than	listed property) placed in se	ervice during the		
	•						14	
15 Property subject to sec		election .					15	1 170 170
16 Other depreciation (inc						\	16	1,170,478
Part IIII MACRS De	preciation ([o not inclu		roperty.) (Se ction A	e instructio	ns.)		
17 MACRS deductions for	assets placed u	n service in ta			011 -		17	
18 If you are electing t						one or more	<u> </u>	l
general asset accou		•			•	. ►		
Section B—Asse							recia	ition System
		(c) Bası						•
(a) Classification of property	(b) Month and year placed in service	deprecia (business/in use	vestment	(d) Recovery period	(e) Convent	tion (f) Metho	od	(g)Depreciation deduction
19a 3-year property		only—see ins	cructions)				+	
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				27 5 yrs	MM	S/L		
property				27 5 yrs	MM	S/L		
i Nonresidential real				39 yrs	MM	S/L		
property	n C. Assots Blac	od in Sonico	During 2011	Tay Year Using	MM the Alterna	S/L tive Depreciation	n Svet	
20a Class life	II C—ASSELS FIAC	Sed III Service	During 2011	Tax Teal Osing		S/L	Jyst	eiii
b 12-year				12 yrs		S/L		
c 40-year				40 yrs	ММ	S/L		
	y (see ınstruc	tions)		·				
21 Listed property Enter a	amount from line	28					21	
22 Total. Add amounts fro and on the appropriate							22	1,170,478
23 For assets shown abov portion of the basis att	•	_		year, enter the	23			

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See i	the i	instruc	tions	for li	mits 1	or pa	sseng	er au	tomoŁ	iles.)
24a Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	Γ _{No}		2	4b If "\	∕es," ıs	the ev	ıdence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(c Cost o ba		(busines	(e) deprecia ss/investr e only)		(f) Recover period	y M∈	(g) ethod/ ventior		(h Depreci deduc	ation/		(i) Electe section : cost	179
25 Special depreciation allo 50% in a qualified busi	· · · · · · · · · · · · · · · · · · ·		erty placed	in service (during the	tax year	and u	used moi	e than	25						
26 Property used more	e than 50%	ın a qualıfıed	business	use												
		%									+			-		
		%									+			+		
27 Property used 50%	orless in a		iness us	e										_		
		%							S/L - S/L -		_			4		
		%							S/L -							
28 Add amounts in co	olumn (h), lır	nes 25 throug	ıh 27 En	ter here a	and on lu	ne 21, _l	oage	1 .	28	8						
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1					•		29				
			ction B													
Complete this section If you provided vehicles to														se vehic	les	
					a)	(1		1	(c)		(c			2)		f)
30 Total business/investment miles driven during the year (do not include commuting miles)			_	Vehi	cle 1	Vehi	cle 2	. V	ehicle	3	Vehi	cle 4	Vehi	cle 5	Vehi	icle 6
31 Total commuting i	mıles drıven	during the ye	ar .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32	during the y		s 30													
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Ye	s 1	No.	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		y by a more th	nan 5%													
36 Is another vehicle			e? .													
Section	on C—Que	stions for	Emplo	ers W	ho Pro	vide \	/ehi	icles	or U	se by	/ The	ir En	nploy	ees	ı	
Answer these questio 5% owners or related				eption to	comple	ting Se	ction	B for v	ehicle	s use	d by e	mploy	ees wh	o are	not mo	re tha
37 Do you maintain a employees? .		cy statement											our •	<u> </u>	es	No
38 Do you maintain a	written polic	cy statement	that prof	nibits per	sonal us	e of vel	nicle	s, exce	pt con	nmutır	ng, by					
employees? See t						ers, dire	ector	s, or 1	% or m	nore o	wners		• •	-	-+	
39 Do you treat all us						•	٠. ٠	•	• .	•	. •		•	-		
40 Do you provide movehicles, and reta				oyees, ol	btain info	ormatio •	n froi	m your • •	emplo •	yees .	about •	the us	e of the	e		
41 Do you meet the r	equirements	concerning	qualified a	automobi	le demor	nstratio	n us	e? (See	ınstrı	uction	s)					
Note: If your answ	ver to 37, 38	, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sect	ion E	3 for the	cove	red ve	hicles	5				
Part VI Amo	rtization															
(a) Description of c	costs	(b) Date amortization begins	n	(A mort a mo	ızable			(d) Code ection	de A mortizati			or A mort				
42 A mortization of co	sts that her		ur 2011	tax vear	(see ins	truction	ns)		<u> </u>	3.3011	30					
		, ==,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	,	,		,									
						-+			\dashv							
43 Amortization of co	sts that beg	jan before you	ur 2011 t	ax year					•		43					
44 Total. Add amoun	_	•		•	ere to re	port				Ì	44					