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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation) Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection

| _ | <u> </u> | or the | 2012 cale | ndar year, or tax y | | | | , 2012, and | d ending | | | , 20 | |
|--------------|--------------------------------|--|-------------|---------------------------|-------------------|-------------------------|-----------------------|---|--------------------|------------------|----------------|-----------------------|-------------------|
| E | 3 (| Check if a | applicable | C Name of organization | on VFW POST | #5890 | | | | | Employe | er identification n | umber |
| |] / | Address o | change | Doing Business As | | | | | | | | 85-0273250 | |
| |] ı | Name cha | ange | Number and street | (or PO box if ma | all is not de | livered to street add | dress) F | Room/suite | E | Telephor | ne number | |
| |] 1 | nıtıal retu | ırn | 76 UNSER BLVD. | SE | | | | | | | 505-891-2470 | |
| |] 7 | rerminate | ed | City, town or post of | | ZIP code | | · | | | | | |
| Ī | _ | Amended | | RIO RANCHO NM | 87124-2497 | | | | | ٥ | Gross re | eceipts \$ | 232,182 |
| Ī | | | | F Name and address | | r DANI | NY EVANS, POS | T COMMAN | IDEB | | | for affiliates? Yes | |
| _ | | | ,, poeg | 76 UNSER BLVD. | | | · · | | ·DLIX | 1 | | ncluded? Yes | _ |
| - | | Fav-even | npt status | 501(c)(3) | | | (insert no) 494 | 7(a)(1) or [| 527 | 1 ' ' | | list (see instruction | |
| - | | Nebsite: | | 301(0)(3) | <u> </u> | 13 / 3 | (5671110) 494 | 7(a)(1) 01 L | 321 | H(c) Group e | | • | , |
| - | | | | Corporation Tr | ust 🗸 Associa | tion Clot | nor h | I Voor | of formation | | | | |
| í | | rt I | Summ | | ust V Associa | tion [] Ot | ner - | L_Tear | of formation | <u> </u> | IVI State | of legal domicile | NM |
| | | | | | | | | | | | | | |
| | | | | escribe the organi | | | | ictivities: | SUPPOR | TBENEFITS | FOR VE | ETERANS OF T | HE US |
| | 8 | 4 | ARMED F | ORCES THAT SEE | RVED IN FORE | IGN WAR | <u> </u> | •••• | | | | | |
| | ğ | | | | | | | | | | | | |
| | ē | | | | | | | | | | | | |
| ന | Activities & Governance | | | is box ▶ ☐ if the | - | | • | • | | | 1 1 | its net assets. | |
| 2013 | <u>ع</u> ا | | | of voting member | | | | | | | 3 | | |
| \sim | es | | | of independent vi | | | | | | | 4 | | 7 |
| 0 | ₹ | 5 | Total nur | mber of individual | s employed ır | n calenda | ar year 2012 (Pa | art V, line 2 | 2a) | | 5 | | 0 |
| N | Ŧ | 6 | Total nur | mber of volunteers | s (estimate if i | necessa | y) | | | | 6 | L. | 10 |
| ⋛ | ~ | 7a | Total unr | elated business r | evenue from | Part VIII, | column (C), line | e 12 | | | 7a | | 0 |
| MAY | | b | Net unre | lated business tax | xable income | from Fo | m 990-T, line 3 | | | | 7b | | 0 |
| \cap | П | | | | | | | | | Prior Yea | r | Current Y | ear |
| SCANNED | | 8 | Contribu | tions and grants (| (Part VIII, line | 1h) | | | 🗀 | | 7,475 | | 6,474 |
| \mathbb{Z} | Revenue | 9 Program service revenue (Part VIII, line 2g) | | | | | | | | | 27,971 | | 27,066 |
| 3 | ķ | | - | ent income (Part V | ` | | 14,000 | | 70 | | | | |
| 5 | <u>~</u> | | | venue (Part VIII, c | | | | | | | 37,834 | | 70,001 |
| (V) | | 12 | Total revi | enue—add lines 8 | ethrough 11 (n | nust eau: | al Partovill, colu | mn (A) line | . 12) | | | | |
| - | | | | nd sımılar amoun | | | | | , 12, | | <u>87,</u> 280 | | 103,611 |
| | | 14 | Donofito | paid to or for me | Shore (Dort IV | ၇, _{(၆} ပ်ပျား | | | · · | | | | |
| | ľ | | | | | | | (A) F | `: | _ | 7,628 | | 6,892 |
| | Ses | | | other compensation | | | | | | | | | |
| | Expenses | | | onal fundraising te | · 30 3.4 | 24 | Service Service | 7 7. 10 10 10 10 10 10 10 10 10 10 10 10 10 | 500 MIN MIN 2 - 21 | | | | |
| | 훘 | | | draising expense | | Crest Contraction | 36.00 | 10 m | | | | | |
| | ۳ | | | penses (Part IX, c | | | | | | | 63,877 | | 79,129 |
| | | 18 | Total exp | enses. Add lines | 13-17 (must | equal Pa | · | | 71,505 | | 86,021 | | |
| _ | | 19 | Revenue | less expenses. S | Subtract line 1 | 8 from li | ne 12 | | | | 15,775 | | 17,590 |
| | ဗ္ဗဗ္ဗ | | | | | | | | Be | ginning of Curr | ent Year | End of Y | ear |
| - | age Bage | 20 | Total ass | ets (Part X, line 1 | 6) | | | | [| | 334,267 | | 348,160 |
| - | A B | 21 | Total liab | ollities (Part X, line | 26) | | | | . [| | | | |
| | Net Assets or Fund Balances | 22 | Net asse | ts or fund balance | es. Subtract I | ine 21 fro | om line 20 . | | [| | 334,267 | | 348,160 |
| | | rt II | Signa | ture Block | | | | | | | | | |
| • | _ | | | ıry, I declare that I hav | e examined this i | retum, ınclı | iding accompanying | schedules a | and stateme | ents, and to the | best of n | nv knowledge an | d belief, it is |
| | | | | lete Declaration of pre | | | | | | | | , , | • |
| - | | | | $-\frac{(1)}{2}$ | | | | | | | | | |
| 9 | Sig | n I | Sign | nature of officer | | | | | | Date | , | | |
| | Her | | | | . EUAN | < | O A M M ACO | 100 | | | | 112 | |
| • | ici | ٦ | Typ | e or print name and titl | | <u> </u> | COMMAN |)CK | | | MAY | -12 | |
| - | | | <u> </u> | | | I Dunna - A | 0.0000 | | I Data | | Τ | PTIN | |
| ı | Pai | d | ן ביוויט ון | pe preparer's name | | rieparer | signature | | Date | | Check [| Ŕ ul | |
| ı | Pre | pare | STEVE | N M ROGERS | | | | | | 1-13 | self-emp | pioyea P001 | 87034 |
| | | e Only | | name > STEVEN | ROGERS RTF | RP | | | | Firm's | s EIN ▶ | 85-0357 | 082 |
| _ | | | Firm's a | address ► 1400 BA | | | | | 88 | Phon | e no | 505-896-8 | |
| Ī | Vlay | the IR | S discus | s this return with | the preparer | shown al | oove? (see insti | ructions) | <u> </u> | | | | s 🗌 No |
| Ē | For | Paperw | ork Redu | ction Act Notice, s | see the separa | te instru | ctions. | | Cat No | 11282Y | | Form | 990 (2012) |

| <u>Fårm</u> 990 | 0 (2012) | Page 2 |
|-----------------|---|----------------|
| Part I | | |
| | Check if Schedule O contains a response to any question in this Part III | 🗆 |
| 1 | Briefly describe the organization's mission: | |
| | SUPPORT BENEFITS FOR VETERANS OF THE US ARMED FORCES THAT SERVED IN FOREIGN WARS. | |
| | | |
| | • | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | |
| | | Yes 🗹 No |
| _ | If "Yes," describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | |
| | | Yes 🗹 No |
| 4 | If "Yes," describe these changes on Schedule O. | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations. | measured by |
| | the total expenses, and revenue, if any, for each program service reported. | ons to others, |
| | , | |
| 4a | (Code:) (Expenses \$ including grants of \$) (Revenue \$ |) |
| | VFW VOICE OF DEMOCRACY PROGRAM: | |
| | | |
| | SCHOLARSHIPS FOR \$2.2 MILLION GIVEN TO HIGH SCHOOL STUDENTS IN GRADES 9 - 12. | |
| | *************************************** | ···· |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue \$ |) |
| | PATROIT'S PEN: | |
| | NATIONAL ESSAY CONTEST FOR STUDENTS IN GRADES 6 - 8. SCHOLARSHIPS AWARDED TO THE WINNERS FROM E | |
| | STATE. | AUT |
| | | |
| | | |
| | | |
| | | ••••• |
| | | |
| | | |
| | | |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue \$ | <u> </u> |
| | TEACHER OF THE YEAR: | / |
| | | |
| | NATIONAL SPONSOR FOR THE SMART/MAHER VFW NATIONAL CITIZENSHIP EDUCATOR AWARD. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4d | Other program services (Describe in Schedule O.) | |
| | (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses ▶ | |

| Part IV | Checklist | of Required | Schedules |
|---------|-----------|-------------|------------------|
|---------|-----------|-------------|------------------|

| | | | Yes | No |
|------|---|------|-----|--------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | | √ |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | ` |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I | 3 | | ✓ |
| 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 "Yes," complete Schedule C, Part II</i> | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | ✓ |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | √ |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | · ✓ |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | _ |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable. | · 1. | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | | ✓ |
| 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 | | → |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | √ |
| 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 | | √ |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | 1 |
| 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 | | 1 |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | ✓ |
| 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 and XII is optional | 12b | | ✓ |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | ✓ |
| 14 a | | 14a | | ✓ |
| 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, Parts I and IV | 14b | | ✓ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | 1 |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | 1 |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | √ |
| 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 | | 1 |
| 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 | | 1 |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | 1 |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| | | | | |

| | 0 (2012) | | | age 4 |
|----------|---|------------|-----|----------|
| Part | Checklist of Required Schedules (continued) | | Yes | N. |
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | res | No |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | <u>√</u> |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | | √ |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | √ |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 24d 25a | | ✓ |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | 1 |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . | 26 | | 1 |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | 1 |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | 30 | | 3. 2. |
| a b | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28a 28b | | ✓ ✓ |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | 1 |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 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 | | √ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | 1 |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | 1 |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | 1 |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | ✓ |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | ✓ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, | | | |

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

37

38

| Part | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V | | | |
|--------|--|-----------|--|--|
| | Chock in Correction Continued a response to arry question in this Fair V | ·· | Yes | No. |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 | . 52 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | 17.9 | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | 1 | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 74 | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 | * | <u>*</u> | |
| þ | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | | |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | ✓_ |
| ь | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | | 1 |
| b | If "Yes," enter the name of the foreign country: ▶ | - | | _ <u> </u> |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | «' | ·, |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | - | 1 |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | 1 |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | ✓_ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| _ | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | سې «د | Ý |
| 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? | | | - |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7a 7b | | √ |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 75 | | |
| _ | required to file Form 8282? | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | *** | 3" | 77 |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | 1 |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | 7f | | ✓ |
| 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 | w., | ✓ |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | " | / t | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring | <u> </u> | | |
| 0 | organization, have excess business holdings at any time during the year? | 8 | | - |
| 9 | Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? | 9a | | |
| a b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | 1 |
| 10 | Section 501(c)(7) organizations. Enter: | | | <u> </u> |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | (| ' |
| 11 | Section 501(c)(12) organizations. Enter: | | #* *- | |
| а | Gross income from members or shareholders | رُيْرُ دُ | | |
| Ь | Gross income from other sources (Do not net amounts due or paid to other sources | | | 1 |
| | against amounts due or received from them.) | 46 | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | <u> </u> | ✓ |
| _ b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | 15/ | 1 |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | ļ., | |
| ~ | the organization is licensed to issue qualified health plans | * . | 1. | |
| С | Enter the amount of reserves on hand | 1 | . ! | 1 |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | t | 1 |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . | 14b | | |
| | | | | |

| Part | , , , , , , , , , , , , , , , , , , , | | | | | | | | | | | |
|----------|--|-------------|----------------|---|--------------|--|--|--|--|--|--|--|
| | response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched | ule O. Se | e ıns | tructi | ons. | | | | | | | |
| Secti | Check if Schedule O contains a response to any question in this Part VI | | : : | | | | | | | | | |
| | and management | | | Yes | No | | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a | 7 | \neg | | | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or | | . ` | ÷. | ` | | | | | | | |
| | if the governing body delegated broad authority to an executive committee or similar | ŀ | 1 | | | | | | | | | |
| | committee, explain in Schedule O. | | l | ^ | | | | | | | | |
| Ъ | Enter the number of voting members included in line 1a, above, who are independent . 1b | 7 | 1 | | | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship | ρ with 📙 | | | | | | | | | | |
| 3 | any other officer, director, trustee, or key employee? | · . · . - | 2 | | ✓ | | | | | | | |
| | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? | | | | | | | | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | | | | | | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's asset: | | 5 | | V | | | | | | | |
| 6 | Did the organization have members or stockholders? | * | 6 | _ | - | | | | | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or a | ppoint | | <u> </u> | | | | | | | | |
| | one or more members of the governing body? | | 7a | ✓ | | | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) mer | nbers, | | | 1 | | | | | | | |
| _ | stockholders, or persons other than the governing body? | | 7b | | <u> </u> | | | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken the year by the following. | during | 32 | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | | | | | | | |
| а | The governing body? | - | | | | | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | <u> </u> | 8a 8b | _ | 1 | | | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach | | 55 | | <u> </u> | | | | | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | 9 | | ✓ | | | | | | | |
| Secti | on B. Policies (This Section B requests information about policies not required by the Internal | Revenu | e Co | ode.) | | | | | | | | |
| | | | | Yes | No | | | | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | [| 10a | | ✓ | | | | | | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such charaffiliates, and branches to ensure their operations are consistent with the organization's exempt purpos | | | | | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the | ⊢ | 10b 11a | | | | | | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | - | भक्र | *10 | V | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> | . - | 12a | | | | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to col | | 12b | | <u> </u> | | | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If | "Yes," | | | | | | | | | | |
| | describe in Schedule O how this was done | <u> </u> | 12c | | | | | | | | | |
| 13 | Did the organization have a written whistleblower policy? | _ | 13 | | ✓ | | | | | | | |
| 14 15 | Did the organization have a written document retention and destruction policy? | | 14 | 7 .7 | ✓ | | | | | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decis | | . 3.6 | | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | 15a | | \ | | | | | | | |
| b | Other officers or key employees of the organization | 17 | 15b | | \ | | | | | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | Γ, | 5. | , | | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang | ement 📙 | | | | | | | | | | |
| | with a taxable entity during the year? | | 16a | | ✓ | | | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate and the organization of evaluation and the organization of evaluations are likely to the organizati | ate its | | | | | | | | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safegua organization's exempt status with respect to such arrangements? | ra the | 46b | | | | | | | | | |
| Secti | on C. Disclosure | · · | 16b | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE | | | | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T | (Section | 501(| c)(3)s | only) | | | | | | | |
| | available for public inspection. Indicate how you made these available. Check all that apply. | • | • | | • • • | | | | | | | |
| | ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) | | | | | | | | | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, co | onflict of | ınter | est p | olicy, | | | | | | | |
| 00 | and financial statements available to the public during the tax year. | | | | | | | | | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and i | ecords o | f the | | | | | | | | | |
| | organization: ▶ POST ADJUTANT, 79 UNSER BLVD SE, RIO RANCHO NM 87124-2497 | | | | | | | | | | | |

| Form 990 | (2012) |
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|----------|--------|

| Part VII | Compensation of Officers, Directors | , Trustees, I | Key Employees, | Highest Com | pensated Er | nployees, | and |
|----------|-------------------------------------|---------------|----------------|--------------------|-------------|-----------|-----|
| | Independent Contractors | | | | | | |

| Check if Schedule O contains a response to any question in this Part VII . | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization no | r any related | d orga | anız | atio | n c | ompe | nsa | ated any curren | t officer, director | , or trustee. |
|---|-------------------------------|--------------------------------|-----------------------|------------|--------------|------------------------------|--------|-----------------|---------------------------------------|------------------------------|
| | | | | (0 | C) | | | | | |
| (A) | (B) | / | | | ition | | | (D) | (E) | (F) |
| Name and Title | Average | | | | | than one of the second | | Reportable | Reportable | Estimated |
| | hours per | | | | | or/trust | | compensation | compensation from | amount of |
| | week (list any hours for | 유통 | ž | Q | ~ | gŢ | F | from the | related organizations | other compensation |
| | related | 호호 | 2 | Officer | 9 | 등등 | Former | organization | (W-2/1099-MISC) | from the |
| | organizations below dotted | ct a | lon | | 遺 | yee c | = | (W-2/1099-MISC) | | organization |
| | line) | ` fg | altr | | Key employee | ğ | | | | and related organizations |
| | | Individual trustee or director | Institutional trustee | | ١ | ens | Ì | 1 | | ŭ |
| | | | ď | | | Highest compensated employee | | | | |
| (1) DANNY EVANS | 10.00 | | | | | ŀ | | | | |
| (1) DANNY EVANS COMMANDER | 10.00 | | | 1 | | | | | | |
| (2) ROY BRISCOE | 10.00 | _ | ┢ | <u> </u> | ┢ | - | ├- | | | |
| SR. VICE COMMANDER | 10.00 | | | / | | | | | | |
| (3) EDNIEGT CADCIA | 10.00 | | - | ř | ├- | - | ├- | - | | |
| *************************************** | 10.00 | | | 1 | | | | | | |
| JR. VICE COMMANDER (4) TYRAND TEEL | 10.00 | | - | V | - | _ | - | | · · · · · · · · · · · · · · · · · · · | |
| | 10.00 | | | / | | | | | | |
| ADJUTANT (5) THE DONNA | 10.00 | | - | - | ┢ | - | ├ | - | | |
| (5) TIM DONNA | 10.00 | | | 1 | | | | |] | |
| QUARTERMASTER | | _ | | • | | <u> </u> | - | | | |
| (6) GARY GERBER | 5.00 | 1 | | | | | | | | |
| TRUSTEE (7) A DOWN DEE | 5.00 | | | ├ | ┢ | - | ├ | | | |
| (7) LARRY MCBEE | 5.00 | 1 | | ŀ | İ | | | | | |
| TRUSTEE | 5.00 | | | \vdash | ├ | | - | | | |
| (8) LARRY COTTON | 5.00 | 1 | | | | | l | | | |
| TRUSTEE | | - | - | ⊢ | ┢ | | ┝╌ | | | |
| (9) | ····· | | | | Ì | | | | | |
| (10) | | | | | Г | | | | | |
| | | 1 | | | | | | | | |
| (11) | | | | | | | | | | |
| | | | | | | | L | L | | |
| (12) | | Į | | | | l | | | | |
| (40) | | <u> </u> | - | _ | | - | ļ | ļ | | |
| (13) | | | | | 1 | | | | | |
| (14) | - | - | \vdash | - | ⊢ | | ⊢ | | | |
| (14) | | 1 | | | | | | | | • |
| | 1 | ı | ſ | ı | 1 | 1 | 1 | i | ì | |

| rant | Section A. Officers, Directors, Trust (A) | (B) | _ | | (C Pos | C) ition | | | (D) | (E) | (F) | |
|--------|--|--|----------|-----------------------|-------------|--------------|-------------------------------|-------------|--|---------------------------------------|---------------------|---------------|
| | Name and title | Average hours per week (list any | box, | unles | s pe dad | rson | than o is both or/trust | an | Reportable compensation from | Reportable compensation related | e Estimated | |
| | | hours for related organizations below dotted line) | | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizatio (W-2/1099-M | ns compensatio | n I |
| (15) | | | | | | | | | | | | |
| (16) | | | | | | - | | | | | | |
| (17) | | | | | | | | | | | | |
| (18) | | | | | | | | _ | | | | |
| (19) | | | | - | | - | | | | | | |
| (20) | | | | | | _ | | | | | | |
| (21) | | | | - | | - | | | | i | | |
| (22) | | | | - | | - | | | | | | |
| (23) | | | | | | | | | | | | |
| (24) | | | _ | <u> </u> | | _ | | | - | | | |
| (25) | | | | _ | | - | | _ | | | | |
| 1b | Sub-total | | <u> </u> | <u> </u> | | <u>L</u> | | > | 1 | | | |
| c d | Total from continuation sheets to Part Total (add lines 1b and 1c) | - | | | | | | ▶ | | | | |
| 2 | Total number of individuals (including bur reportable compensation from the organi | not limited | | | | | above | e) w | ho received m | ore than \$10 | 00,000 of | |
| 3 | Did the organization list any former of employee on line 1a? If "Yes," complete | | | | | | | emp | bloyee, or high | nest compe | yes nsated 3 | No ✓ |
| 4 | For any individual listed on line 1a, is the organization and related organizations individual | | | | | | | | | | | 7 |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization | | | | | | | | | zation or ind | lividual | 3.14 |
| | on B. Independent Contractors | | | | | | | | | | | |
| 1 | Complete this table for your five highest compensation from the organization. Repyear. | | | | | | | | | | | ax |
| | (A) Name and business add | ress | | | | | | | (B) Description of s | services | (C) Compensation | |
| | | | | | | _ | | | | | | |
| | | | | | | | | | | | | |
| 2 | Total number of independent contractor received more than \$100,000 of compensations. | | | | | | | tr | ose listed ab | ove) who | | nayy Nayyy |

Form **990** (2012)

| Part | VIII | Statement of Revenue | e | | | | | | | | | | | |
|--|--------------|---|---------------------|------------------|----------------|---------------------------------------|--|---|--------------|---|-------------|---------------------|--|-------------|
| | | Check if Schedule O conf | tains a respor | nse to any quest | ion in th | ııs Part V | /III <u>.</u> . | | | | <u> </u> | <u> </u> | <u> </u> | |
| | | | | | (# Total re | () evenue | € | (B) elated or exempt unction evenue | | (C) Unrelate business revenue | S | excluded under s | D) enue d from ta sections 3, or 514 | |
| ts, Grants Amounts | 1a b c | Federated campaigns . Membership dues Fundraising events | 1b | 6,474 | | | | | | | | * | \$ | * |
| Contributions, Gifts, Grants and Other Similar Amounts | d e f | Related organizations . Government grants (contributions, gifts, and similar amounts not include | grants, d above 1f | | * | | | | | ** | *** | 4 | * | |
| | 9 | Noncash contributions included in | - | | | | | | | | | | | |
| | <u>h</u> | Total. Add lines 1a-1f | . | Business Code | * | 6,474 | | | ╁ | - 11 | k 4 | | | |
| Program Service Revenue | 2a b | PROGRAM REVENUE | | Busiless Code | <u> </u> | 27,066 | | 27,060 | 6 | | | | | |
| <u> </u> | С | | | | | | | | | | | | | |
| am Sen | d e | | - | | | | _ | | | | | | | |
| <u>rog</u> | l f | All other program service | | | | | | | | | <u>_</u> _l | | | |
| | 3 3 | Total. Add lines 2a–2f. Investment income (included and other similar amount | luding divide s) | ends, interest, | | 27,066 70 | # <u>}</u> ;}. | · · · · · · · · · · · · · · · · · · · |) | | ** | <u>. # }</u> | | ! |
| | 4 | Income from investment of | tax-exempt bo | ond proceeds ► | | | | | ⊥_ | | | | | |
| | 5 | Royalties | (i) Real | (ii) Personal | *** | \$ · | 1 1 | . 1 | 2 | ~ \$\dag{\dag{\dag{\dag{\dag{\dag{\dag{ | r 🌡 🎖 | . 44 | - | 34.50 |
| | 6a | Gross rents | | | | | | | 1 | . 35. | ** | * | * | |
| | b | Less: rental expenses | | | | Ž | 3 | % ~ . 6 | | 12: | * | * | ₹ . ¥ '\$ | 27 |
| | d | Rental income or (loss) Net rental income or (loss) | | | | *** | | | - 20 | 123 | | | | |
| | 7a | | (i) Securities | (ii) Other | ¥ | · 🌞 ^ | *** | | | - ; | ** | | \$4 | .8 |
| | b | Less: cost or other basis and sales expenses . | | | : 🎨 | , | \$. | ** | * | | ŽŽ | ** | ** | w.jv. |
| | d | Gain or (loss) L Net gain or (loss) | | ▶ | | | | | | | | | | |
| evenue | 8a | Gross income from fundrevents (not including \$ | | : | | * | ₽ v | | | ** | ŧš | * | 4 | |
| Other Reven | h | of contributions reported of See Part IV, line 18 Less: direct expenses . | · · · a | | * | | | | ŝ | | | 2 | | |
| 0 | | Net income or (loss) from | | events . > | | | | | - | | | | | |
| | 1 | Gross income from gamin See Part IV, line 19 | g activities. | 40,340 | | | | | | A | | | | |
| | b | Less: direct expenses . | b | 27,147 | * | | | | | | 2 | | | |
| | С | Net income or (loss) from | | vities ► | | 13,193 | | 13,19 | 3 | | | | | |
| | 10a | Gross sales of inven | | | | | | | | |] | [| | |
| | į. | returns and allowances Less: cost of goods sold | b | | | · · · · · · · · · · · · · · · · · · · | | | - | | | <u></u> | | |
| | <u>C</u> | Net income or (loss) from Miscellaneous Rever | | Business Code | | 10,852 | <u> </u> | 10,85 | 2 | | | | | |
| | 110 | | iuc . | Business Code | | 10.007 | - | 40.00 | _ | | | : | | |
| | 11a b | POST RELIEF FUND | | | <u> </u> | 19,807 26,149 | | 19,80 26,14 | | | | | | |
| | c | POST BUILDING FUND All other revenue | | | | <u> </u> | | 20,14 | - | | | | | |
| | e | Total. Add lines 11a-11d | | • | _ | 45,956 | | | 1- | | | | | |
| | 12 | Total revenue. See instr | | | | 102 611 | | 07 12 | , | | | | | |

| | • | | | | |
|----------------|---|-----------------------|---|---------------------------------------|--------------------------|
| Form 9 | 90 (2012) | | | | |
| | t IX Statement of Functional Expenses | | | | Page 10 |
| Secti | on 501(c)(3) and 501(c)(4) organizations must com | plete all columns. A | Il other organization | s must complete co | olumn (A) |
| | Check if Schedule O contains a respons | se to any question | in this Part IX | 3 mast complete co | <u>παιτίτι (</u> γγ). |
| Do no 8b, 9 | ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | | | genoral expenses | ; « |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | | | · · · · · · · · · · · · · · · · · · · | H1 |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | adii Vilin | |
| 4 5 | Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees | 6,892 | 6,892 | <u> </u> | |
| 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 8 | Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees): | - | | | |
| а | Management | | | | |
| b | Legal | | | | |
| C | Accounting | | | | |
| d | Lobbying | | *** | 8/46. | |
| e f | Professional fundraising services. See Part IV, line 17 | | # 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 | i, Ni siz | |
| _ | Investment management fees Other (If line 11g amount exceeds 10% of line 25, column | | | | |
| 9 | (A) amount, list line 11g expenses on Schedule O) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 18 | Travel | | | | |

| 5 | Compensation of current officers, directors, trustees, and key employees | | | | |
|----|---|---------------|---|----------------|------------------------|
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees): | <u> </u> | | | |
| а | Management | | | | |
| b | Legal | | | | |
| С | Accounting | | | | · |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | # (a | | |
| f | Investment management fees | | * | 3.7 3.83 13.85 | |
| g | Other (If line 11g amount exceeds 10% of line 25, column | | | | |
| 9 | (A) amount, list line 11g expenses on Schedule O) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | - | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | - | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | 41 | | 41 | |
| 22 | | | | | |
| 23 | Depreciation, depletion, and amortization . | | | | |
| | Insurance | | | | |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column | | | | |
| | (A) amount, list line 24e expenses on Schedule O.) | | | ļ | |
| _ | · · · · · · · · · · · · · · · · · · · | | | | |
| a | POST DELICE FUND | 28,278 | | 28,278 | |
| b | POST RELIEF FUND | 18,530 | 18,530 | | |
| C | POST BUILDING FUND | 30,428 | | 30,428 | |
| d | POST DUES RESERVE | 1,852 | 1,852 | | |
| e | All other expenses Total functional expenses. Add lines 1 through 24e | | | | |
| 25 | | | | | |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | 86,021 | 27,274 | 58,747 | |
| | - | | | | Form 990 (2012) |
| | | | | | , |

Form 990 (2012) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 1 36,267 50,091 2 2 14.000 14.069 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section * 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Assets 7 8 Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 9 9 10a 4 3 6 other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 284.000 10c 284,000 11 Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 . . . 12 12 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 334,267 16 348,160 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X 25 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances sij. complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds.

Total liabilities and net assets/fund balances

30

31

32

33

34

348,160 Form 990 (2012)

348,160

30

31

32

33

34

334,267

334,267

| • | | |
|--------|-----|--------|
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| ייווטי | 220 | 120121 |

Page 12

| | | | | <u> </u> |
|------|--|------------|---------------|---|
| Part | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | . <u></u> | <u> </u> | <u> 🗅</u> |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 103,611 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 86,021 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 17,590 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 334,267 |
| 5 | Net unrealized gains (losses) on investments | 5 | | |
| 6 | Donated services and use of facilities | 6 | | -3,697 |
| 7 | Investment expenses | 7 | | |
| 8 | Prior period adjustments | 8 | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | |
| | 33, column (B)) | 10 | | 348,160 |
| Part | XII Financial Statements and Reporting | | | |
| | Check if Schedule O contains a response to any question in this Part XII | <u></u> | <u> </u> | <u> </u> |
| | | | | Yes No |
| 1 | Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other | | 1.234 | |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex | plaın ın | 133 | |
| | Schedule O. | | ئىڭ مۇر | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | ✓ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were com | piled or | 1.2.4 | : · · · · · · · · · · · · · · · · · · · |
| | reviewed on a separate basis, consolidated basis, or both: | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | • • • | 2b | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were auditionally been approximately associated basis or both | ed on a | 1 33 | |
| | separate basis, consolidated basis, or both | | 3 A 3 V | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | 3- 33-2 | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent account | | | |
| | • | | 2c | · · · |
| | If the organization changed either its oversight process or selection process during the tax year, ex Schedule O. | kpiain in | | |
| • | | familia va | بم محمد تعديد | <u> </u> |
| за | As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133? | torth in | | |
| L | · · | | 3a | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a | | | |
| | required addit of addits, explain why in scriedule of and describe any steps taken to undergo such a | uulis | 3b | 000 : |
| | | | Form | 990 (2012) |