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Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

OMB No 1545-1150

2012**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

A For the 2012 calendar year, or tax year beginning <u>12/01</u> , 2012, and ending <u>11/30</u> , 2013	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C <u>Jennings American Legion Hospital Foundation, Inc.</u> <u>1634 Elton Road</u> <u>Jennings, LA 70546</u>
D Employer identification number <u>27-1713013</u>	E Telephone number
F Group Exemption Number	
G Accounting Method ☐ Cash ☒ Accrual Other (specify) _____	
H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	
I Website: <u>N/A</u>	
J Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527	
K Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.	
L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. <u>\$ 57,233.</u>	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	30,105.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	277.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	26,851.
c Less direct expenses from gaming and fundraising events	6c	4,264.	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	22,587.	
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	52,969.	
EXPENSES	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	51.
	17 Total expenses. Add lines 10 through 16	17	51.
NET ASSETS	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	52,918.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	113,164.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	166,082.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

Part II	Balance Sheets. (see the instructions for Part II.)
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Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	113,164.	22 166,082.
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	113,164.	25 166,082.
26 Total liabilities (describe in Schedule O)	0.	26 0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	113,164.	27 166,082.

Part III	Statement of Program Service Accomplishments (see the instrs for Part III.)
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Check if the organization used Schedule O to respond to any question in this Part III ☐

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28	See Schedule O		
	(Grants \$) If this amount includes foreign grants, check here	☐	28 a 51.
29			
	(Grants \$) If this amount includes foreign grants, check here	☐	29 a
30			
	(Grants \$) If this amount includes foreign grants, check here	☐	30 a
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here	☐	31 a
32	Total program service expenses (add lines 28a through 31a)	☐	32 51

Part IV	List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV).
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Check if the organization used Schedule O to respond to any question in this Part IV

[illegible]