

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the Information on the form.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Inspection

A			calendar year, o						and en				, 20	
В	Check if applicable		C Name of orga	anization I	POST 41	90 VETE	RANS OF	FORE	IGN	D Employ	er identific	ation num	ber	
	Address		Doing Busine	ess As	-	,					63-05	00440)	
П	Name ch	nange	Number & str	eet (or PO bo	ox if mail is not o	lelivered to stre	et address)	Room/su	ite i	E Telepho	ne number			
П	Initial reti	um	PO BOX	2041			•				256-3	55-57	02	
П	Terminate	ed	City or town,	state or provin	ice, country, and	ZIP or foreign	postal code			G Gross receipts	\$		2985	77.
Ħ	Amended	d return			35602-20	-	•		F		this a group	return		
Ħ	Application			address of pri		JERR	RY G MCE	T.ROY					□ voe	X No
	pending		PO BOX		DECA'		AL 35		0/1		subordinate			
	Fav ever	mpt status			01(c)(19) ∢ (i				-	If "	e all subord: No," attach a	list	_	□ N-
_			501(0)	(3) [25] 3	01(c)(± ⊃) 	iiseit iio)	4947(a)(1) o	r	527		e instructions		Yes	No
	Nebsite			<u> </u>	তা			1			oup exemption		•	7. T
		rganization	Corporation	n Trust	X Association	Other ►		L Ye	ar of form	ation		State of lega	domicile	AL_
	art l		nmary					VIIIID T D	TIMTO	NIG T	NID 757	7.000		
			escribe the orga					NTRIB		ло А	ND AW.	ARDS	WERE	<u> D</u>
ø		AND	TNDIAIDO	IALS OF	N THE BA	ASIS OF	NEED O	R MER	TT					
ä														
Ę														
Activities & Governance	2	Check to	nis box 🕨 💹 i	if the organia	zation disconti	nued its oper	ations or dispos	sed of mo	re than	25% of it	s net asse	ts		
O at	1		of voting memb	-	h	· .			•		. 3		35	
es	4	Number	of independent	voting mem	bers of the gg	verning body	(Part VI, line 1	b)	•		. 4		35	
Ę	5	Total nu	mber of individu	als employe	d in calendar	year 2 <u>013 (P</u>	art V, line 2a)				. 5		8	
Ę	6	Total nu	mber of voluntee	ers (estimati	e if necessary)	2				6		35	
⋖	7 a	Total un	elated business	s revenue fro	om Part VIII C	olumn [®] C) lir	℃ 124. Ö.				7a		914	17.
	b	Net unre	lated business t	taxable inco	me from Form	1 990-T, line 3	34 (2)				7b		-8	53.
					0	GDEN,	1172			Prior Ye	ar	Cur	rent Year	
Ф	8	Contribu	tions and grants	s (Part VIII, I	line 1h)	SVELUP'S		ൗ രി.					846	64.
2			service revenu			MARK DATE	00150	2015						
Revenue			ent income (Pari										2	54.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)												63.
							lumn (A), line 1	2)					1760	
			nd sımılar amou											62.
			paid to or for m											40.
ø,			other compens						54.					
Expenses			onal fundraising				-							
ᅙ			draising expens	1			*							
ŭ			penses (Part IX			· —			<u></u>			T. 54-000	1241	60
			enses Add line			•	 1) line 25)	• • •					1783	
	1		less expenses	•	•		t), iii ic 25) .							35.
		TOTOTION	icos experioco	- Oubtidot ii	10 10 110111 1111	6 12 .	· · · · · · · · · · · · · · · · · · · 	•	Bec	ginning of	Current			55.
Net Assets or Fund Balances	20	Total ass	ets (Part X, line	16\					<u> </u>	Year	9640.	En	3829	36
Sse Bala	24		olities (Part X, III	•			• • •				3840.			11.
t g	21		•	•							5800.		3797	
			ts or fund balan		a line 21 from	1 line 20	· · · ·	• • • •		39	3000.		3191	<u> 23.</u>
	art II		ature Block									-		
Und	er penal	ilties of pe	rjury, I declare that	t i have exami	ned this return,	including accor	npanying scheduler) is based on all in	es and stat	tements,	and to the	best of my l	knowledge		
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Sig	-		Signature of officer		Rose						Date		1	
He	re		JERRY G	MCLEMC	RE	MM	S CON	MMAND	ER_		10- J	<u> </u>	<u>t </u>	
			Type or print name		<u> </u>)	(`)			_,-			-	
Pai			/Type preparer's n		\sim	Preparer's	signature	Date			neck if			
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Us	e Only	/ Firm		WALKER		TAX IN				Firm's E	in ▶ 4	6-168	2888	
		Firm'			TH AVE	STE 20	4			Phone				
				DECATU	IR AL 35	601-	<u>-</u>			256	-355-	5702		
Ma	y the IR	RS discu	ss this return wit	th the prepa	rer shown abo	ve? (see inst	tructions)					X	es 🗌	No

For Paperwork Reduction Act Notice, see the separate instructions.

Fòrm	990 (2013)	POST 4190 VETERAN	NS OF FOREIGN	63-0500440 Page 2
Pai	rt III Stat	ement of Program Service Ac	complishments	
			ponse or note to any line in this Part III .	
1		cribe the organization's mission TRITTTONS AND AWARI	S ARE DISTRIBUTED TO V	ARIOUS ORGANIZATIONS AND
			IS OF NEED OR MERIT	ARTOOS ORGANIZATIONS AND
			or while on which	
2	Did the org	ganization undertake any significant	program services during the year which were	not listed on
				Yes $\overline{\mathbb{X}}$ No
		escribe these new services on Sche		
3			ke significant changes in how it conducts, any	program services? \square Yes $[X]$ No
4		escribe these changes on Schedule	occomplishments for each of its three largest pr	roorem convoce on managered by evenence
•			are required to report the amount of grants an	
		ue, if any, for each program service	_	a anocations to others, the total expenses,
			•	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$
			<u> </u>	
	-			
	_			

4b	(Code) (Expenses \$	including grants of \$) (Revenue \$
		· - · · · · · · · · · · · · · · · · · ·		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$
				
	•			- · · · · · · · · · · · · · · · · · · ·
				
4d	_	ram services (Describe in Schedule	· O)	
	(Expenses		ng grants of \$)(Reve	nue \$)
<u>4e</u>	Total progr	am service expenses ▶		
BCA				Form 990 (2013)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		-	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in			
_	effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	_		
	or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			Х
7	Schedule D, Part I	6_		
7		7		Х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			- 1
0	complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		-	
	endowments, permanent endowments, or quasi-endowments? If "Yes", complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		· · · · · · ·	(, , , , , , , ,
	VII, VIII, IX, or X as applicable	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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			.,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a				3,7
	Schedule D, Parts XI, and XII	12a		X
Þ	Was the organization included in consolidated, independent audited financial statement for the tax year? If "Yes," and if			v
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{\Lambda}{X}$
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	<u>├</u>
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance	140		- 11
	to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Χ government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States X on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Χ 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 X 24a b 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? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? Χ 26 If so, complete Schedule L, Part II 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 Χ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes." complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 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 Χ 34 35a 35a If "Yes" to line 35a, 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 Χ 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O Χ 38

Form **990** (2013)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			- age (
	Check if Schedule O contains a response or note to any line in this Part V			. \square
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 0	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		,
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	. 1c	_X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 8			<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	. 2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country		[
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	L	L	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
	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	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	X	
	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		L	<u> </u>
	and services provided to the payor?	7a		
	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 file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	_		ļ
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f	_	
	If the organization rec'd a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
	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	1	à	3
	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		
	Did the organization make any taxable distributions under section 4966?			ł
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
	Section 501(c)(7) organizations. Enter	20		
	Initiation fees and capital contributions included on Part VIII, line 12			1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			1
	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	·	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	7		`
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which		1	
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	1		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	. 14b		

Form 990 (2013)
Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing		h 🖹	, §
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ليلا
	any other officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	37	X
6	Did the organization have members or stockholders?	6	X	├──
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more		X	
L	members of the governing body?	7a		├
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons	75		Х
	other than the governing body?	7b		7.2
8	·			
_	the year by the following The governing body?	8a	X	r. 188
a h	The governing body?	8b	X	
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	ļ	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	<u> </u>	ode.	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	l		
12a		12a		<u>X</u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
С				1
	describe in Schedule O how this was done	12c	- 37	├—
13	Did the organization have a written whistleblower policy?	13	X	—-
14	Did the organization have a written document retention and destruction policy?	14		ISS TO
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?		5 €<	
•	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	X
h	Other officers or key employees of the organization	15b		X
	If ``Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			H
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			. 8.2
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	I 5.:	iŝ z	, ,
	its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	1	ļ. ;	
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL			
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, conflict of interest			
	policy, and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	000	۵	
	organization: ▶LAWRENCE SEPAN PO BOX 204 DECATUR AL 35603 256-351-	・ウラム	9	

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

Check if Schedule O contains a response or note to any line 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		ated or	ganız	atıor	ns co	отреп	sate	ed any current officer	, director, or trustee	
(A) Name and Title	(B) Average	(do n box, u office	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1)JERRY MCLROY COMMANDER	20									
(2)GEORGE KUNKEL	20			X				0	0	0
SR VICE COMM	20			X				0	О	0
(3)MICHAEL BRIGHT	1	 		1					. 0	
JR VICE COM	20			X				0	0	0
(4)LAWRENCE WILLI										
QUARTERMASTER	20			X				0	0	0
(5)										
(6)								,		
(7)	-							73_4/71		
(8)								5 de 5		
(9)										
(10)										
(11)			<u> </u>					,		
(12)										
(13)										
(14)										

Fòrm 990 (2013)

Part VII Section A. Officers, Direct	ors, Trus	stees,	Key	Em	ploy	yees,	and	d Highest Compe	nsated Employe	es (con	tinued)
				(C)						l i		
		.		Positi						1		
(A)	(B)					nan one both ar		(D)	(E)		(F)	
Name and title	Average					trustee		Reportable	Reportable	Es	timated	
	hours per	오글	5	0	×	욕포	F	compensation	compensation	an	ount of	
	week	물절	Statu	Officer	уе	렇	Former	from	from related		other	
	(list any	Individual trustee or director	ğ	٦	Key employee	yee yee	er	the	organizations	comi	ensatio	n
	hours for related	ੇ ਛੂ	<u>a</u>		oye	້ິ 🚆		organization	(W-2/1099-MISC)	1	om the	
	organiza- tions	stee	Institutional trustee		е	Highest compensatemployee		(W-2/1099-MISC)	(anizatioi	n
	below		ď			i äi		,			related	
	dotted (ine)					"					nızatıon	
(15)	<u> </u>	<u> </u>								U.ga		
	1											
(16)		<u> </u>		1								
	1											
(17)										 		
(18)										1		
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(19)							ļ	·		1		
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(21)						Ì				1		
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(22)										 		
	1											
(23)												
(24)									-			
	1											
(25)										i		
										[
1b Sub-total		٠					•	0	0	ŀ	0	
c Total from continuation sheets to Part V	II, Section	n A					>	0	0		0	
d Total (add lines 1b and 1c)							•	0	0	T	0	_
2 Total number of individuals (including but n	ot limited	to thos	e liste	d ab	ove) who	rece	eived more than \$100	0,000 of reportable	compens	ation	
from the organization ▶									•	•		
											Yes	No
3 Did the organization list any former officer.	director, o	or trust	ee, ke	ey er	nplo	yee, c	r hig	ghest compensated		:		
employee on line 1a? If "Yes," complete S										3	· · · · · · · · · · · · · · · · · · ·	X
4 For any individual listed on line 1a, is the s						and o	othe	r compensation from				;
the organization and related organizations								•		ľ	,	
ındıvıdual										4		X
5 Did any person listed on line 1a receive or	accrue co								vidual for			ſ
services rendered to the organization? If "								-		. 5		X
Section B. Independent Contractors							_	-	- -			
1 Complete this table for your five highest co	mpensate	d inde	pende	ent co	ontra	actors	that	received more than	\$100,000 of			
compensation from the organization Repo										year		
(A)				_				(B)			 C)	
Name and business a	ddress							Description of se	rvices	Compe		
					_							
		_										
2 Total number of independent contractors (i	ncluding b	ut not	limited	to t	hose	e liste	d ab	ove) who received m	ore than		<u></u>	
\$100,000 in compensation from the organi	zation >											

Fart VIII 'Statement of Revenue Check if Schedule O contain

		Check if Schedule O contains a response or no	ote to any line in th	iis Part VIII		.
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f	84664.			
	<u> </u>		04004.		<u> </u>	
Program Service Revenue	2a b c d	Business Code		A		
<u>α</u>	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and other similar amounts)	254.	Torre water the second of the	254.	and to the fine of the second
	5	Royalties				
	6a b c	Less rental expenses . Rental income or (loss)				
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses				
		Gain or (loss)			<u> </u>	
	d	Net gain or (loss)				
Other Revenue	b	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a Less direct expenses b Net income or (loss) from fundraising events ▶				
		Gross income from gaming	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7		\$\$ ×,	
		activities See Part IV, line 19 a Less direct expenses b				
		Net income or (loss) from gaming activities	1	£		
		Gross sales of inventory, less returns and allowances . a 213659.	povervenue union car un unusum a	1	1	, , , , , , , , , , , , , , , , , , ,
	b	Less cost of goods sold . b 122496.			,	. Target and a second a second and a second
		Net income or (loss) from sales of inventory ▶	91163.	·	91163.	
		Miscellaneous Revenue Business Code	21100.		<u> </u>	
	11a		i	<u> </u>		
	b					
	C	All other rouse				
		All other revenue				
ļ	e	Total. Add lines 11a-11d ▶				
	12	Total revenue. See instructions	176081.		91417.	

Part IX Statement of Functional Expenses

360	Chock if Schodule O contains				colullii (A).
	Check if Schedule O contains a	, , 			· · · · · · · · · · · · · · · · · · ·
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
'	organizations in the US See Part IV, line 21	13962.	13962.		
2	Grants and other assistance to individuals in				
_	the United States See Part IV, line 22				
3	Grants and other assistance to governments,		_		
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members	740.	740.		
5	Compensation of current officers, directors,			(2000 to 200 to	**************************************
	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	39454.		39454.	
8	Pension plan accruals and contributions (include			031011	
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	<u></u>			<u>.</u>
10	Payroll taxes				
11	Fees for services (non-employees)		_		
'' a	Management				
b	Legal				
	-	2300.		2300.	
C	Accounting	2300.		2300.	
d	Lobbying			8.i	
e	Prof fundraising services See Part IV, line 17			Lange of the second of the sec	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
40	col (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	1612.		1612.	
13	Office expenses	1012.		1012.	
14	Information technology				-171
15	Royalties	22052.		22052.	
16	Occupancy	22032.	_	22052.	
17	Travel				<u>.</u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	<u> </u>	6507		
19	Conferences, conventions, and meetings	6527.	6527.		
20	Interest				
21	Payments to affiliates	1 (1 71		1.6171	
22	Depreciation, depletion, and amortization	16171.		16171.	
23	Insurance	11939.		11939.	
24	Other expenses Itemize expenses not covered				, .
	above (List miscellaneous expenses in line 24e If	, * ·	* * \$\dag{\psi}_A \tag{\psi}_A \tag{\psi}_A \tag{\psi}_A \tag{\psi}_A \tag{\psi}_A \qua	* •	\$,
	line 24e amount exceeds 10% of line 25, column			,	1
	(A) amount, list line 24e expenses on Schedule O)	10466			
а	SEE STMT	12466.			
b		12883.			
C		24953.			
d		13057.			
е	All other expenses	200.	200.	11110	
25	Total functional expenses. Add lines 1 through 24e	178316.	33895.	144421.	
	loint costs. Complete this line only if the organization				
	eported in column (B) joint costs from a combined				
e	ducational campaign and fundraising solicitation				
	Check here ▶ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part.			
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	21163.	1_	10630
2	Savings and temporary cash investments		2_	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4_	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete	<u> </u>		
	Part II of Schedule L		5	
6	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)		134	
,	voluntary employees' beneficiary organizations (see instructions) Complete			
3 0 0 7	Part II of Schedule L		6	
8 7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or other		The E	
	basis Complete Part VI of Schedule D 10a 671090.			
b	Less accumulated depreciation 10b 299784.	387477.	10c	371306.
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	·
14	Intangible assets		14	
15	Other assets See Part IV, line 11	1000.	15	1000
16	Total assets. Add lines 1 through 15 (must equal line 34)	409640.	16	382936
17	Accounts payable and accrued expenses		17	<u> </u>
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	-
, 21	Escrow or custodial account liability Complete Part IV of Schedule D	·	21	
22	Loans and other payables to current and former officers, directors,	Was Na &		
22	trustees, key employees, highest compensated employees, and			
i	disqualified persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	10399.	23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
ŀ	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D	3441.	25	3211.
26	Total liabilities. Add lines 17 through 25	13840.	26	3211.
	Organizations that follow SFAS 117 (ASC 958), check here ▶ and		,	
:	complete lines 27 through 29, and lines 33 and 34.	*		
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ [X]			50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
. [and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	383220.	30	381960.
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	-1260.	32	-2235.
27 28 29 30 31 32 33	Total net assets or fund balances	381960.	33	379725.
34	Total liabilities and net assets/fund balances	395800.	34	382936.
			<u></u> -	Form 990 (2013)

-orm ,9	90 (2013) POST 4190 VETERANS OF FOREIGN	53-	0500	440	Page	12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)		1		760	
2	Total expenses (must equal Part IX, column (A), line 25)	. [2		783	
3	Revenue less expenses Subtract line 2 from line 1		3		-22	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	.[4	3	819	60.
5	Net unrealized gains (losses) on investments		5			
6	Donated services and use of facilities		6			
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,					
			10	3	797	25.
Part	XII Financial Statements and Reporting					\Box
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			11		
	Schedule O				1 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		•	. 2a	X	L
	If "Yes." check a box below to indicate whether the financial statements for the year were complied or			- T	5-17	. 3
	reviewed on a separate basis, consolidated basis, or both					Wat !
	Separate basis X Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			. 2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				**************************************	
	separate basis, consolidated basis, or both			. 1		
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 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?			. 2c	X	
	If the organization changed either its oversight process or selected process during the tax year, explain in					
	Schedule O					3. 3
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			. 3a		Χ_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u>.</u>		3b	L	
				Form	990	(2013)

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, ▶ Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public

Name of the organization Employer identification number POST 4190 VETERANS OF FOREIGN WARS 63-0500440 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate grants from (during year) Aggregate value at end of year . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Yr. a Total number of conservation easements 2a 2b c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ... Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ...

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Policy control of the organization collections and explain how they further the organization's exempt purpose in Part XIII Policy the part of the organization solicitions and explain how they further the organization's exempt purpose in Part XIII Policy the part of the organization solicitions of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrive and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990. Part XIII as the organization an apart, trustee, custodian or other intermedial for contributions or other assets not included on Form 990, Part X Initial 1 the organization and the arrangement in Part XIII and complete the following table Part IV Initial 1 the part of the organization or other intermedial for contributions or other assets not included on Form 990, Part X Initial 2 the organization and the part of the organization or other intermedial for contributions or other assets not included on Form 990, Part X Initial 2 the organization and the part XIII and complete the following table Part IV Initial 2 the part XIII and complete the following table Initial 2 the part XIII Initial 3 the organization and the part XIII Initial 3 the part XIII Initial 4 the	Pa	rt III Organiza (continu	itions Maintaining (Collections of Art,	Historical Treasur	es, or Other Simila	r Assets	
Check all that apply a Public shinkline	3			, and other records, chec	k any of the following th	at are a significant use of	f its collection	n items
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical fressures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?					,	· ·		
Preservation for future generations	а	<u> </u>			d Loan or exchange	ge programs		
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year dut the organization along to receive denotinos of aft, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	b	Scholarly research	h					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year dut the organization along to receive denotinos of aft, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	С	Preservation for fu	uture generations					
5 During the year, did the organization solicit or receive donations of art. Instonical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4	_		ctions and explain how t	they further the organiza	tion's exempt purpose in	Part XIII	
Part IV. line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for combibitions or other assets not included on Form 990. Part X? 1a is the organization an agent, trustee, custodian or other intermediary for combibitions or other assets not included on Form 990. Part X? 1b if "Yes," explain the arrangement in Part XIII and complete the following table 1c Beginning balance 1d Additions during the year 1e Distributions during the year 1f Ending balance 2a Distributions during the year 1g Ending balance 2a Distributions during the year 1g Ending balance 2a Distributions during the year 1g Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year 1a Beginning of year 1a Beginning of year 1b Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 2b Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 2c Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment P 0 . 0 0 % 1b Permanent endowment P 0 . 0 0 % 1c Temporarily restricted endowment P 0 . 0 0 % 1b Permanent endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the p	5		_					
Part IV. line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for combibitions or other assets not included on Form 990. Part X? 1a is the organization an agent, trustee, custodian or other intermediary for combibitions or other assets not included on Form 990. Part X? 1b if "Yes," explain the arrangement in Part XIII and complete the following table 1c Beginning balance 1d Additions during the year 1e Distributions during the year 1f Ending balance 2a Distributions during the year 1g Ending balance 2a Distributions during the year 1g Ending balance 2a Distributions during the year 1g Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year 1a Beginning of year 1a Beginning of year 1b Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 2b Endoment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 2c Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment P 0 . 0 0 % 1b Permanent endowment P 0 . 0 0 % 1c Temporarily restricted endowment P 0 . 0 0 % 1b Permanent endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) uncertainges in line 2a, 2b, and 2e should equal 100% 3a Are there endowment funds not in the p		to raise funds rather ti	han to be maintained as p	part of the organization's	collection?			. ☐ Nc
1a Is the organization an agent, fursitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table Amount 1c 1c 1d 1d 1d 1d 1d 1d	Pai							} 0,
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Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, PartIV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated Depreciation 1a Land Description of property basis (investment) basis (other) Depreciation b Buildings 663, 578. 296, 871. 366, 707. c Leasehold improvements Dequipment Type 15.	4							 -
Complete if the organization answered "Yes" to Form 990, PartIV, line 11a. See Form 990, Part X, line 10. Description of property	Pa							
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Schedule D (Form 990) 2013

Part VII	Investments - Other Securities. Complete if the organization answered '	"Yes" to Form 990. Par		Part X. line 12.	
	(a) Description of security or category	(b) Book value			
	(including name of security)	(,	Cost or end-of-year mar		
(1) Financial	derivatives				
(2) Closely-he	eld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
<u>(E)</u>					
(F)					
(G)					
(H)	4)			»	
	in (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		*	
Part VIII	Investments - Program Related.	"Voo" to Form 000 Don	+ IV/ line 11e See Form 000	Don't V. lune 42	
	Complete if the organization answered (a) Description of investment type	(b) Book value	(c) Method of value		
	(a) Description of investment type	(b) Book value	Cost or end-of-year mar		
(1)			Cost of end-of-year mar	ket value	
(1) (2)					
(3)					
(4)		- 			
(5)			 		
					
(6)					
(8)		-		· · ·	
(9)					
	in (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX	Other Assets.		E-10-00-00-00-00-00-00-00-00-00-00-00-00-		
	Complete if the organization answered	"Yes" to Form 990 Par	t IV line 11d See Form 990	Part X line 15	
	(a) Desc		111, 1110 000 1 0111 000,	(b) Book value	
(1)				(2) 2001 10.00	
(2)				_	
(3)				_,	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 15)				
Part X	Other Liabilities.				
	Complete if the organization answered	d "Yes" to Form 990, Pa	art IV, line 11e or 11f. See For	rm 990, Part X,	
	line 25.				
1	(a) Description of Liability	(b) Book value			
(1) Federal In					
(2) PAYRO	OLL SALES & LIQUOR TAX	3,211.			
(3)					
(4)					
(5)]		
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)	▶ 3,211.			
2. Liability fo	or uncertain tax positions. In Part XIII, provide the te	xt of the footnote to the orga	inization's financial statements that r	eports the	
	liability for uncertain tax positions under FIN 48 (AS				

SCHEDULE (Form 990) Internal Revenue Service

Department of the Treasury

Name of the organization

POST 4190 VETERANS OF FOREIGN WARS

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Open to Public Inspection 2013

OMB No 1545-0047

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Employer identification number.

63-0500440

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

General Information on Grants and Assistance Part I

X Yes 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?

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. Part II can be duplicated if additional space is needed Part II

Schedule I (Form 990) (2013)	Sched				tions for Form 990.	ce, see the Instruc	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
	▲ :: ::	. :	:		he line 1 table .	anizations listed in t	3 Enter total number of other organizations listed in the line 1 table
	▲ :			isted in the line 1 table	tions	01(c)(3) and govern	
							(12)
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							(1)
or assistance	non-cash assistance	(book, FMV, appraisal, other)	cash assistance	grant	ıf applıcable		organization or government
(h) Purpose of grant	(g) Description of	(f) Method of valuation	(e) Amount of non-	(d) Amount of cash	(c) IRC section	NI (Q)	1 (a) Name and address of

İ	ľ	Program	Management	
Description of the Asset	Total	Services	and General	Fundraising
PPLIES	12,466.	12,466.		
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EANING	12,883. 24,953.		12,883. 24,953.	
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INITE	63,559.	12 666	50,893.	
	63,339.	12,666.	30,693.	
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Form 4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172 2013

Attachment

Attachment Sequence No 179

Name(s) shown on return Business or activity to which this form relates Identifying number POST 4190 VETERANS OF FOREIGN NON PROFIT ORG 63-0500440 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 1 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married 5 filing separately, see instructions (a) Description of property (c) Elected cost 6 (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8. . 9 10 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562. 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 15 Property subject to section 168(f)(1) election . . . 16 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 1,840. 17 MACRS deductions for assets placed in service in tax years beginning before 2013 . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr (d) Recovery (a) Classification of property year placed in (business/investment use (f) Method Convention deduction репоф service only - see instructions) 19 a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property A 14 8 g 25-year property 25 yrs S/I ММ S/L h Residential rental 27 5 yrs 27 5 yrs MM S/L property S/L i Nonresidential real 39 yrs MM MM S/L property Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year S/L 12 yrs c 40-year 40 yrs ММ S/L Part IV Summary (See instructions) 21 Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 1,840. 22 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23